

Recipient Committee Campaign Statement

(Government Code Sections 84200-84216.5)

Type or print in ink.

Date Stamp

CALIFORNIA
2001/02
FORM

COVER PAGE
460

Page 1 of 182

For Official Use Only

Statement covers period

from 01/01/2010

through 03/17/2010

Date of election if applicable:
(Month, Day, Year)

06/08/2010

SEE INSTRUCTIONS ON REVERSE

1. Type of Recipient Committee: All Committees - Complete Parts 1,2,3, and 4.

- ☐ Officeholder, Candidate Controlled Committee
☐ State Candidate Election Committee
☐ Recall

(Also Complete Part 5.)

- ☒ General Purpose Committee
☒ Sponsored
☐ Small Contributor Committee
☐ Political Party/Central Committee

- ☐ Ballot Measure Committee
☐ Primary Formed
☐ Controlled
☐ Sponsored

(Also Complete Part 6.)

- ☐ Primary Formed Candidate/
Officeholder Committee
(Also Complete Part 7.)

2. Type of Statement:

- ☐ Pre-election Statement
☒ Semi-annual Statement
☐ Termination Statement
☐ Amendment (Explain below)

- ☐ Quarterly Statement
☐ Special Odd-Year Report
☐ Supplemental Preelection
Statement - Attach Form 495

3. Committee Information

I.D. NUMBER
860346

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
HDR, Inc. PAC

STREET ADDRESS (NO P.O. BOX)

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Omaha</u>	<u>NE</u>	<u>68114</u>	

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX

CITY	STATE	ZIP CODE	AREA CODE/PHONE

OPTIONAL: FAX/E-MAIL ADDRESS

Treasurer(s)

NAME OF TREASURER
Ronald S. Siemionkowski

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Detroit</u>	<u>MI</u>	<u>48275</u>	<u>248/371-7268</u>

NAME OF ASSISTANT TREASURER, IF ANY
Stephanie Ming

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Detroit</u>	<u>MI</u>	<u>48275</u>	<u>248/371-7268</u>

OPTIONAL: FAX/E-MAIL ADDRESS

4. Verification

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on _____ By _____
DATE SIGNATURE OF TREASURER OR ASSISTANT TREASURER

Executed on _____ By _____
DATE SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT OR RESPONSIBLE OFFICER OF SPONSOR

Executed on _____ By _____
DATE SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

Executed on _____ By _____
DATE SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC
State of California

Recipient Committee Campaign Statement Cover Page – Part 2

Type or print in ink.

COVER PAGE - PART 2

CALIFORNIA
FORM **460**

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5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP

Related Committees Not Included in this Statement: List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or to make expenditures on behalf of your candidacy.

COMMITTEE NAME

I.D. NUMBER

NAME OF TREASURER

CONTROLLED COMMITTEE?

☐ YES ☐ NO

COMMITTEE ADDRESS STREET ADDRESS (NO P.O.BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

COMMITTEE NAME

I.D. NUMBER

NAME OF TREASURER

CONTROLLED COMMITTEE?

☐ YES ☐ NO

COMMITTEE ADDRESS STREET ADDRESS (NO P.O.BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

6. Ballot Measure Committee

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER

JURISDICTION

☐ SUPPORT
☐ OPPOSE

Identify the controlling officeholder, candidate, or state measure proponent, if any.

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

OFFICE SOUGHT OR HELD

DISTRICT NO. IF ANY

7. Primarily Formed Committee

List names of officeholder(s) or candidate(s) for which this committee is primarily formed.

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT
☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT
☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT
☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT
☐ OPPOSE

Attach continuation sheets if necessary

Campaign Disclosure Statement Summary Page

Type or print in ink.
Amounts may be rounded
to whole dollars.

SUMMARY PAGE

Statement covers period from 01/01/2010 through 03/17/2010	CALIFORNIA FORM 460 Page 3 of 182 I.D. NUMBER 860346
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

HDR, Inc. PAC

Contributions Received

		Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions	Schedule A, Line 3	\$58,666.40	\$58,666.40
2. Loans Received	Schedule B, Line 7	\$0.00	\$0.00
3. SUBTOTAL CASH CONTRIBUTIONS	Add Lines 1 + 2	\$58,666.40	\$58,666.40
4. Nonmonetary Contributions	Schedule C, Line 3	\$0.00	\$0.00
5. TOTAL CONTRIBUTIONS RECEIVED	Add Lines 3 + 4	\$58,666.40	\$58,666.40

Calendar Year Summary for Candidates Running in Both the State Primary and General Elections

	1/1 through 6/30	7/1 to Date
20. Contribution Received	\$0.00	\$0.00
21. Expenditures Made	\$0.00	\$0.00

Expenditures Made

6. Payments Made	Schedule E, Line 4	\$69,826.00	\$69,826.00
7. Loans Made	Schedule H, Line 7	\$0.00	\$0.00
8. SUBTOTAL CASH PAYMENTS	Add Lines 6 + 7	\$69,826.00	\$69,826.00
9. Accrued Expenses (Unpaid Bills)	Schedule F, Line 3	\$0.00	\$0.00
10. Nonmonetary Adjustment	Schedule C, Line 3	\$0.00	\$0.00
11. TOTAL EXPENDITURES MADE	Add Lines 8 + 9 + 10	\$69,826.00	\$69,826.00

Expenditure Limit Summary for State Candidates

22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit)

Date of Election (mm/dd/yy)	Total to Date
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Current Cash Statement

12. Beginning Cash Balance	Previous Summary Page, Line 16	\$561,223.47	To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).
13. Cash Receipts	Column A, Line 3 above	\$58,666.40	
14. Miscellaneous Increases to Cash	Schedule I, Line 4	\$532.44	
15. Cash Payments	Column A, Line 8 above	\$69,826.00	
16. ENDING CASH BALANCE	Add Lines 12 + 13 + 14, then subtract Line 15	\$550,596.31	
If this is a termination statement, Line 16 must be zero.			

17. LOAN GUARANTEES RECEIVED..... Schedule B, Part 2 \$0.00

Cash Equivalents and Outstanding Debts

18. Cash Equivalents	See instructions on reverse	\$0.00
19. Outstanding Debts	Add Line 2 + Line 9 in Column B above	\$0.00

*Since January 1, 2001. Amounts in this section may be different from amounts reported in Column B.

Schedule A

Monetary Contributions Received

Type or print in ink.
Amounts may be rounded to whole dollars.

SCHEDULE A

Statement covers period		CALIFORNIA FORM 460
from 01/01/2010		
through 03/17/2010		Page 4 of 182
		I.D. Number 860346

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
HDR, Inc. PAC

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/8/2010	Alfredo Arce Helotes, TX 78023	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Marketing Manager	\$20.00	\$140.00	
2/5/2010	Dempsey Vass Vinton, VA 24179	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Regional Controller-east	\$20.00	\$100.00	
1/8/2010	Dempsey Vass Vinton, VA 24179	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Regional Controller-east	\$20.00	\$100.00	
1/22/2010	Dempsey Vass Vinton, VA 24179	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Regional Controller-east	\$20.00	\$100.00	
1/8/2010	Ahmad Soueid Vienna, VA 22182	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Principal/sr Vice President	\$25.00	\$100.00	

SUBTOTAL

Schedule A Summary

1. Amount received this period - contributions of \$100 or more. (Include all Schedule A subtotals.)	\$21,682.00
2. Amount received this period - unitemized contributions of less than \$100	\$36,984.40
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.)	TOTAL \$58,666.40

*Contributor Codes
IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

FPPC Form 460 (JUNE/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>01/01/2010</u> through <u>03/17/2010</u>		CALIFORNIA FORM 460
Page <u>5</u> of <u>182</u>		
NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
3/5/2010	Ahmad Soueid Vienna, VA 22182	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Principal/sr Vice President	\$25.00	\$100.00	
2/5/2010	Ahmad Soueid Vienna, VA 22182	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Principal/sr Vice President	\$25.00	\$100.00	
1/22/2010	Ahmad Soueid Vienna, VA 22182	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Principal/sr Vice President	\$25.00	\$100.00	
3/5/2010	Amy Dammarell Portland, OR 97213	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc E&rm Business Group Manager	\$25.00	\$100.00	
2/5/2010	Amy Dammarell Portland, OR 97213	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc E&rm Business Group Manager	\$25.00	\$100.00	
SUBTOTAL						

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IND - Individual
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Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
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SCHEDULE A (CONT.)

Statement covers period from 01/01/2010 through 03/17/2010		CALIFORNIA FORM 460 Page 6 of 182
I.D. Number 860346		

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NAME OF FILER

HDR, Inc. PAC

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/22/2010	Amy Dammarell Portland, OR 97213	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc E&rm Business Group Manager	\$25.00	\$100.00	
1/8/2010	Amy Dammarell Portland, OR 97213	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc E&rm Business Group Manager	\$25.00	\$100.00	
2/5/2010	Amy Miller Walnut Creek, CA 94596	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Water Supply And Treatment Bcl	\$25.00	\$100.00	
3/5/2010	Amy Miller Walnut Creek, CA 94596	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Water Supply And Treatment Bcl	\$25.00	\$100.00	
1/22/2010	Amy Miller Walnut Creek, CA 94596	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Water Supply And Treatment Bcl	\$25.00	\$100.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	01/01/2010	
through	03/17/2010	Page 7 of 182

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER HDR, Inc. PAC	I.D. Number 860346
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DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/8/2010	Amy Miller Walnut Creek, CA 94596	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Water Supply And Treatment Bcl	\$25.00	\$100.00	
3/5/2010	Andre Lauzier Longwood, FL 32750	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Managing Principal	\$25.00	\$100.00	
1/22/2010	Andre Lauzier Longwood, FL 32750	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Managing Principal	\$25.00	\$100.00	
2/5/2010	Andre Lauzier Longwood, FL 32750	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Managing Principal	\$25.00	\$100.00	
1/8/2010	Andre Lauzier Longwood, FL 32750	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Managing Principal	\$25.00	\$100.00	

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	01/01/2010	
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NAME OF FILER
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I.D. Number
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3/5/2010	Barry Kravitz Highland Park, IL 60035	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Section Manager- Structural	\$25.00	\$100.00	
1/8/2010	Barry Kravitz Highland Park, IL 60035	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Section Manager- Structural	\$25.00	\$100.00	
2/5/2010	Barry Kravitz Highland Park, IL 60035	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Section Manager- Structural	\$25.00	\$100.00	
1/22/2010	Barry Kravitz Highland Park, IL 60035	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Section Manager- Structural	\$25.00	\$100.00	
1/22/2010	Benedict Edelen Lexington, KY 40513	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Vice President	\$25.00	\$100.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	01/01/2010	
through	03/17/2010	Page 9 of 182
NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

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2/5/2010	Benedict Edelen Lexington, KY 40513	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Vice President	\$25.00	\$100.00	
3/5/2010	Benedict Edelen Lexington, KY 40513	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Vice President	\$25.00	\$100.00	
1/8/2010	Benedict Edelen Lexington, KY 40513	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Vice President	\$25.00	\$100.00	
3/5/2010	Bill Blaylock Shoreline, WA 98177	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Area E&rm Manager	\$25.00	\$100.00	
1/22/2010	Bill Blaylock Shoreline, WA 98177	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Area E&rm Manager	\$25.00	\$100.00	
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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	01/01/2010	
through	03/17/2010	Page 10 of 182
NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

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1/8/2010	Bill Blaylock Shoreline, WA 98177	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Area E&rm Manager	\$25.00	\$100.00	
2/5/2010	Brent Felker Davis, CA 95617	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc West Region Transportation Dir	\$25.00	\$100.00	
1/22/2010	Brent Felker Davis, CA 95617	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc West Region Transportation Dir	\$25.00	\$100.00	
1/8/2010	Brent Felker Davis, CA 95617	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc West Region Transportation Dir	\$25.00	\$100.00	
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Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
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SCHEDULE A (CONT.)

Statement covers period from 01/01/2010 through 03/17/2010		CALIFORNIA FORM 460 Page 11 of 182
I.D. Number 860346		

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HDR, Inc. PAC

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3/5/2010	Brent Felker Davis, CA 95617	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc West Region Transportation Dir	\$25.00	\$100.00	
1/8/2010	Bruce Poteet Tampa, FL 33609	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Senior Project Manager	\$25.00	\$100.00	
2/5/2010	Bruce Poteet Tampa, FL 33609	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Senior Project Manager	\$25.00	\$100.00	
3/5/2010	Bruce Poteet Tampa, FL 33609	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Senior Project Manager	\$25.00	\$100.00	
1/22/2010	Bruce Poteet Tampa, FL 33609	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Senior Project Manager	\$25.00	\$100.00	
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 IND - Individual
 COM - Recipient Committee
 (other than PTY or SCC)
 OTH - Other
 PTY - Political Party
 SCC - Small Contributor Committee

Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	01/01/2010	
through	03/17/2010	Page 12 of 182

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER HDR, Inc. PAC	I.D. Number 860346
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DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/5/2010	C Edwin Copeland West Palm Beach, FL 33411	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Sr Water Res Proj Mgr/vp	\$25.00	\$100.00	
1/8/2010	C Edwin Copeland West Palm Beach, FL 33411	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Sr Water Res Proj Mgr/vp	\$25.00	\$100.00	
3/5/2010	C Edwin Copeland West Palm Beach, FL 33411	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Sr Water Res Proj Mgr/vp	\$25.00	\$100.00	
1/22/2010	C Edwin Copeland West Palm Beach, FL 33411	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Sr Water Res Proj Mgr/vp	\$25.00	\$100.00	
1/22/2010	Charles Plummer Omaha, NE 68116	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Water Bus Grp Di Central Reg	\$25.00	\$100.00	
SUBTOTAL						

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PTY - Political Party
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Schedule A (Continuation Sheet) Monetary Contributions Received

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Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>01/01/2010</u>		CALIFORNIA FORM 460
through <u>03/17/2010</u>		
		Page <u>13</u> of <u>182</u>
		I.D. Number 860346

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
HDR, Inc. PAC

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/8/2010	Charles Plummer Omaha, NE 68116	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Water Bus Grp Di Central Reg	\$25.00	\$100.00	
2/5/2010	Charles Plummer Omaha, NE 68116	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Water Bus Grp Di Central Reg	\$25.00	\$100.00	
3/5/2010	Charles Plummer Omaha, NE 68116	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Water Bus Grp Di Central Reg	\$25.00	\$100.00	
3/5/2010	Charles Sinclair Coral Springs, FL 33071	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc South Florida Managing Prin	\$25.00	\$100.00	
2/5/2010	Charles Sinclair Coral Springs, FL 33071	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc South Florida Managing Prin	\$25.00	\$100.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>01/01/2010</u>		CALIFORNIA FORM 460
through <u>03/17/2010</u>		
		Page <u>14</u> of <u>182</u>
		I.D. Number 860346

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

HDR, Inc. PAC

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/22/2010	Charles Sinclair Coral Springs, FL 33071	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc South Florida Managing Prin	\$25.00	\$100.00	
1/8/2010	Charles Sinclair Coral Springs, FL 33071	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc South Florida Managing Prin	\$25.00	\$100.00	
2/5/2010	Craig Jardine Billings, MT 59106	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Natl Power Delivery Director	\$25.00	\$100.00	
1/22/2010	Craig Jardine Billings, MT 59106	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Natl Power Delivery Director	\$25.00	\$100.00	
1/8/2010	Craig Jardine Billings, MT 59106	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Natl Power Delivery Director	\$25.00	\$100.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	01/01/2010	
through	03/17/2010	Page 15 of 182
NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
3/5/2010	Craig Jardine Billings, MT 59106	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Natl Power Delivery Director	\$25.00	\$100.00	
1/22/2010	Dale Muellerleile Southlake, TX 76092	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Natl Bus Class Dir/transit Eng	\$25.00	\$100.00	
3/5/2010	Dale Muellerleile Southlake, TX 76092	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Natl Bus Class Dir/transit Eng	\$25.00	\$100.00	
1/8/2010	Dale Muellerleile Southlake, TX 76092	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Natl Bus Class Dir/transit Eng	\$25.00	\$100.00	
2/5/2010	Dale Muellerleile Southlake, TX 76092	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Natl Bus Class Dir/transit Eng	\$25.00	\$100.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
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SCHEDULE A (CONT.)

Statement covers period from 01/01/2010 through 03/17/2010		CALIFORNIA FORM 460 Page 16 of 182
I.D. Number 860346		

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
HDR, Inc. PAC

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/5/2010	Daniel Costello Champlin, MN 55316	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc National Director, Facilities	\$25.00	\$100.00	
3/5/2010	Daniel Costello Champlin, MN 55316	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc National Director, Facilities	\$25.00	\$100.00	
1/22/2010	Daniel Costello Champlin, MN 55316	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc National Director, Facilities	\$25.00	\$100.00	
1/8/2010	Daniel Costello Champlin, MN 55316	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc National Director, Facilities	\$25.00	\$100.00	
1/8/2010	Daniel Harmon Hamilton, MT 59840	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Senior Project Manager	\$25.00	\$100.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	01/01/2010	
through	03/17/2010	Page 17 of 182

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
HDR, Inc. PAC

I.D. Number
860346

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/22/2010	Daniel Harmon Hamilton, MT 59840	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Senior Project Manager	\$25.00	\$100.00	
2/5/2010	Daniel Harmon Hamilton, MT 59840	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Senior Project Manager	\$25.00	\$100.00	
3/5/2010	Daniel Harmon Hamilton, MT 59840	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Senior Project Manager	\$25.00	\$100.00	
3/5/2010	Darlene Gee Orinda, CA 94563	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Marketing Manager	\$25.00	\$100.00	
1/8/2010	Darlene Gee Orinda, CA 94563	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Marketing Manager	\$25.00	\$100.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>01/01/2010</u> through <u>03/17/2010</u>		CALIFORNIA FORM 460
Page <u>18</u> of <u>182</u>		
NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/22/2010	Darlene Gee Orinda, CA 94563	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Marketing Manager	\$25.00	\$100.00	
2/5/2010	Darlene Gee Orinda, CA 94563	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Marketing Manager	\$25.00	\$100.00	
2/5/2010	David Hammond Mercer Island, WA 98040	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Regional Marketing Director	\$25.00	\$100.00	
1/22/2010	David Hammond Mercer Island, WA 98040	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Regional Marketing Director	\$25.00	\$100.00	
3/5/2010	David Hammond Mercer Island, WA 98040	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Regional Marketing Director	\$25.00	\$100.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	01/01/2010	
through	03/17/2010	Page 19 of 182

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
HDR, Inc. PAC

I.D. Number
860346

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/8/2010	David Hammond Mercer Island, WA 98040	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Regional Marketing Director	\$25.00	\$100.00	
2/5/2010	David Lecureux Placerville, CA 95667	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc E&rm Bg Director, West Region	\$25.00	\$100.00	
1/22/2010	David Lecureux Placerville, CA 95667	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc E&rm Bg Director, West Region	\$25.00	\$100.00	
3/5/2010	David Lecureux Placerville, CA 95667	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc E&rm Bg Director, West Region	\$25.00	\$100.00	
1/8/2010	David Lecureux Placerville, CA 95667	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc E&rm Bg Director, West Region	\$25.00	\$100.00	
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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>01/01/2010</u>		CALIFORNIA FORM 460
through <u>03/17/2010</u>		
		Page <u>20</u> of <u>182</u>
NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

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DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/22/2010	David Reardon Cameron Park, CA 95682	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Mgr-area Mrkt	\$25.00	\$100.00	
3/5/2010	David Reardon Cameron Park, CA 95682	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Mgr-area Mrkt	\$25.00	\$100.00	
1/8/2010	David Reardon Cameron Park, CA 95682	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Mgr-area Mrkt	\$25.00	\$100.00	
2/5/2010	David Reardon Cameron Park, CA 95682	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Mgr-area Mrkt	\$25.00	\$100.00	
1/8/2010	David Traeger Council Bluffs, IA 51501	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Sr Project Manager	\$25.00	\$100.00	
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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from 01/01/2010 through 03/17/2010	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER HDR, Inc. PAC	I.D. Number 860346
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DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/5/2010	David Traeger Council Bluffs, IA 51501	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Sr Project Manager	\$25.00	\$100.00	
3/5/2010	David Traeger Council Bluffs, IA 51501	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Sr Project Manager	\$25.00	\$100.00	
1/22/2010	David Traeger Council Bluffs, IA 51501	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Sr Project Manager	\$25.00	\$100.00	
1/8/2010	Dennis Austin Omaha, NE 68154	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Managing Principal	\$25.00	\$100.00	
3/5/2010	Dennis Austin Omaha, NE 68154	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Managing Principal	\$25.00	\$100.00	

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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
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NAME OF FILER
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1/22/2010	Dennis Austin Omaha, NE 68154	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Managing Principal	\$25.00	\$100.00	
2/5/2010	Dennis Austin Omaha, NE 68154	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Managing Principal	\$25.00	\$100.00	
1/22/2010	Douglas Biglen Plano, TX 75025	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Water/wastewater Program Leade	\$25.00	\$100.00	
2/5/2010	Douglas Biglen Plano, TX 75025	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Water/wastewater Program Leade	\$25.00	\$100.00	
1/8/2010	Douglas Biglen Plano, TX 75025	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Water/wastewater Program Leade	\$25.00	\$100.00	
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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	01/01/2010	
through	03/17/2010	Page 23 of 182
NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

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DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
3/5/2010	Douglas Biglen Plano, TX 75025	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Water/wastewater Program Leade	\$25.00	\$100.00	
1/22/2010	Douglas Lisak Overland Park, KS 66221	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc President, Co	\$25.00	\$100.00	
2/5/2010	Douglas Lisak Overland Park, KS 66221	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc President, Co	\$25.00	\$100.00	
3/5/2010	Douglas Lisak Overland Park, KS 66221	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc President, Co	\$25.00	\$100.00	
1/8/2010	Douglas Lisak Overland Park, KS 66221	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc President, Co	\$25.00	\$100.00	
SUBTOTAL						

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(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	01/01/2010	
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER HDR, Inc. PAC	I.D. Number 860346
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DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
3/5/2010	Douglas Murdock Seattle, WA 98112	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Utilities Engineer	\$25.00	\$100.00	
1/8/2010	Douglas Murdock Seattle, WA 98112	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Utilities Engineer	\$25.00	\$100.00	
2/5/2010	Douglas Murdock Seattle, WA 98112	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Utilities Engineer	\$25.00	\$100.00	
1/22/2010	Douglas Murdock Seattle, WA 98112	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Utilities Engineer	\$25.00	\$100.00	
3/5/2010	Douglas Wignall Glenwood, IA 51534	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Director Of Healthcare	\$25.00	\$100.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>01/01/2010</u>		CALIFORNIA FORM 460
through <u>03/17/2010</u>		
		Page <u>25</u> of <u>182</u>
NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/5/2010	Douglas Wignall Glenwood, IA 51534	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Director Of Healthcare	\$25.00	\$100.00	
1/22/2010	Douglas Wignall Glenwood, IA 51534	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Director Of Healthcare	\$25.00	\$100.00	
1/8/2010	Douglas Wignall Glenwood, IA 51534	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Director Of Healthcare	\$25.00	\$100.00	
2/5/2010	Duane Hippe Anchorage, AK 99502	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Mgr Dept	\$25.00	\$100.00	
1/22/2010	Duane Hippe Anchorage, AK 99502	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Mgr Dept	\$25.00	\$100.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>01/01/2010</u> through <u>03/17/2010</u>		CALIFORNIA FORM 460
Page <u>26</u> of <u>182</u>		
NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/8/2010	Duane Hippe Anchorage, AK 99502	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Mgr Dept	\$25.00	\$100.00	
3/5/2010	Duane Hippe Anchorage, AK 99502	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Mgr Dept	\$25.00	\$100.00	
3/5/2010	Edward Bishop Council Bluffs, IA 51503	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Ferm Director Project Delivery	\$25.00	\$100.00	
1/8/2010	Edward Bishop Council Bluffs, IA 51503	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Ferm Director Project Delivery	\$25.00	\$100.00	
2/5/2010	Edward Bishop Council Bluffs, IA 51503	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Ferm Director Project Delivery	\$25.00	\$100.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	01/01/2010	
through	03/17/2010	Page 27 of 182

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

HDR, Inc. PAC

I.D. Number

860346

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/22/2010	Edward Bishop Council Bluffs, IA 51503	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Ferm Director Project Delivery	\$25.00	\$100.00	
1/8/2010	Guillermo Suero Hollywood, FL 33021	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Marketing Mgr-south Fl Transp	\$25.00	\$100.00	
1/22/2010	Guillermo Suero Hollywood, FL 33021	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Marketing Mgr-south Fl Transp	\$25.00	\$100.00	
3/5/2010	Guillermo Suero Hollywood, FL 33021	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Marketing Mgr-south Fl Transp	\$25.00	\$100.00	
2/5/2010	Guillermo Suero Hollywood, FL 33021	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Marketing Mgr-south Fl Transp	\$25.00	\$100.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	01/01/2010	
through	03/17/2010	Page 28 of 182

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
HDR, Inc. PAC

I.D. Number
860346

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/8/2010	Harold Lewis St. Augustine, FL 32092	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Area Manager-mid Atlantic	\$25.00	\$100.00	
3/5/2010	Harold Lewis St. Augustine, FL 32092	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Area Manager-mid Atlantic	\$25.00	\$100.00	
1/22/2010	Harold Lewis St. Augustine, FL 32092	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Area Manager-mid Atlantic	\$25.00	\$100.00	
2/5/2010	Harold Lewis St. Augustine, FL 32092	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Area Manager-mid Atlantic	\$25.00	\$100.00	
1/8/2010	Herbert Grubb Austin, TX 78758	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Senior Project Manager	\$25.00	\$100.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from 01/01/2010 through 03/17/2010	CALIFORNIA FORM 460
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NAME OF FILER HDR, Inc. PAC	I.D. Number 860346
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2/5/2010	Herbert Grubb Austin, TX 78758	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Senior Project Manager	\$25.00	\$100.00	
1/22/2010	Herbert Grubb Austin, TX 78758	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Senior Project Manager	\$25.00	\$100.00	
3/5/2010	Herbert Grubb Austin, TX 78758	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Senior Project Manager	\$25.00	\$100.00	
2/5/2010	James Draheim Burke, VA 22015	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Senior Vp & Managing Principal	\$25.00	\$100.00	
1/22/2010	James Draheim Burke, VA 22015	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Senior Vp & Managing Principal	\$25.00	\$100.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	01/01/2010	
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NAME OF FILER
HDR, Inc. PAC

I.D. Number
860346

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
3/5/2010	James Draheim Burke, VA 22015	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Senior Vp & Managing Principal	\$25.00	\$100.00	
1/8/2010	James Draheim Burke, VA 22015	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Senior Vp & Managing Principal	\$25.00	\$100.00	
3/5/2010	James Lee Winter Park, FL 32789	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc National Director Of Transport	\$25.00	\$100.00	
1/22/2010	James Lee Winter Park, FL 32789	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc National Director Of Transport	\$25.00	\$100.00	
1/8/2010	James Lee Winter Park, FL 32789	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc National Director Of Transport	\$25.00	\$100.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>01/01/2010</u> through <u>03/17/2010</u>		CALIFORNIA FORM 460 Page <u>31</u> of <u>182</u> I.D. Number 860346

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
HDR, Inc. PAC

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/5/2010	James Lee Winter Park, FL 32789	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc National Director Of Transport	\$25.00	\$100.00	
1/8/2010	James Pembroke Phoenix, AZ 85048	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Mgr-sec Water/wastewater	\$25.00	\$100.00	
2/5/2010	James Pembroke Phoenix, AZ 85048	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Mgr-sec Water/wastewater	\$25.00	\$100.00	
1/22/2010	James Pembroke Phoenix, AZ 85048	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Mgr-sec Water/wastewater	\$25.00	\$100.00	
3/5/2010	James Pembroke Phoenix, AZ 85048	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Mgr-sec Water/wastewater	\$25.00	\$100.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>01/01/2010</u> through <u>03/17/2010</u>		CALIFORNIA FORM 460
Page <u>32</u> of <u>182</u>		
NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

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3/5/2010	James Sheahan Murrysville, PA 15668	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Natl Dir Geo Engr	\$25.00	\$100.00	
1/22/2010	James Sheahan Murrysville, PA 15668	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Natl Dir Geo Engr	\$25.00	\$100.00	
1/8/2010	James Sheahan Murrysville, PA 15668	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Natl Dir Geo Engr	\$25.00	\$100.00	
2/5/2010	James Sheahan Murrysville, PA 15668	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Natl Dir Geo Engr	\$25.00	\$100.00	
3/5/2010	James Shiner Corpus Christi, TX 78413	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Senior Vice President	\$25.00	\$100.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	01/01/2010	
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NAME OF FILER HDR, Inc. PAC	I.D. Number 860346
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1/8/2010	James Shiner Corpus Christi, TX 78413	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Senior Vice President	\$25.00	\$100.00	
2/5/2010	James Shiner Corpus Christi, TX 78413	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Senior Vice President	\$25.00	\$100.00	
1/22/2010	James Shiner Corpus Christi, TX 78413	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Senior Vice President	\$25.00	\$100.00	
2/5/2010	Jason Fuller Pittsburgh, PA 15215	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Engineer-struc	\$25.00	\$100.00	
3/5/2010	Jason Fuller Pittsburgh, PA 15215	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Engineer-struc	\$25.00	\$100.00	

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from 01/01/2010 through 03/17/2010		CALIFORNIA FORM 460 Page 34 of 182
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1/22/2010	Jason Fuller Pittsburgh, PA 15215	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Engineer-struc	\$25.00	\$100.00	
1/8/2010	Jason Fuller Pittsburgh, PA 15215	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Engineer-struc	\$25.00	\$100.00	
1/8/2010	Jay Chiglo Naperville, IL 60540	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Senior Project Manager	\$25.00	\$100.00	
2/5/2010	Jay Chiglo Naperville, IL 60540	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Senior Project Manager	\$25.00	\$100.00	
1/22/2010	Jay Chiglo Naperville, IL 60540	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Senior Project Manager	\$25.00	\$100.00	
SUBTOTAL						

*Contributor Codes
 IND - Individual
 COM - Recipient Committee
 (other than PTY or SCC)
 OTH - Other
 PTY - Political Party
 SCC - Small Contributor Committee

Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	01/01/2010	
through	03/17/2010	Page 35 of 182
NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
3/5/2010	Jay Chiglo Naperville, IL 60540	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Senior Project Manager	\$25.00	\$100.00	
1/22/2010	Jeanette Duvall Weirton, WV 26062	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Pm Skills Dev Program Coord	\$25.00	\$100.00	
2/5/2010	Jeanette Duvall Weirton, WV 26062	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Pm Skills Dev Program Coord	\$25.00	\$100.00	
1/8/2010	Jeanette Duvall Weirton, WV 26062	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Pm Skills Dev Program Coord	\$25.00	\$100.00	
3/5/2010	Jeanette Duvall Weirton, WV 26062	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Pm Skills Dev Program Coord	\$25.00	\$100.00	
SUBTOTAL						

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OTH - Other
PTY - Political Party
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Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
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to whole dollars.

SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	01/01/2010	
through	03/17/2010	Page 36 of 182

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER HDR, Inc. PAC	I.D. Number 860346
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DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
3/5/2010	Jeff Curren Georgetown, TX 78628	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Managing Principal	\$25.00	\$100.00	
2/5/2010	Jeff Curren Georgetown, TX 78628	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Managing Principal	\$25.00	\$100.00	
1/8/2010	Jeff Curren Georgetown, TX 78628	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Managing Principal	\$25.00	\$100.00	
1/22/2010	Jeff Curren Georgetown, TX 78628	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Managing Principal	\$25.00	\$100.00	
3/5/2010	Jeff Massengill Corpus Christi, TX 78414	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Nat Dir Ports & Harbors; Sr Vp	\$25.00	\$100.00	

SUBTOTAL

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OTH - Other
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Schedule A (Continuation Sheet) Monetary Contributions Received

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to whole dollars.

SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	01/01/2010	
through	03/17/2010	Page 37 of 182

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
HDR, Inc. PAC

I.D. Number
860346

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/22/2010	Jeff Massengill Corpus Christi, TX 78414	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Nat Dir Ports & Harbors; Sr Vp	\$25.00	\$100.00	
1/8/2010	Jeff Massengill Corpus Christi, TX 78414	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Nat Dir Ports & Harbors; Sr Vp	\$25.00	\$100.00	
2/5/2010	Jeff Massengill Corpus Christi, TX 78414	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Nat Dir Ports & Harbors; Sr Vp	\$25.00	\$100.00	
3/5/2010	John Hyre Cincinnati, OH 45236	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Managing Principal	\$25.00	\$100.00	
2/5/2010	John Hyre Cincinnati, OH 45236	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Managing Principal	\$25.00	\$100.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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to whole dollars.

SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	01/01/2010	
through	03/17/2010	Page 38 of 182
NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/8/2010	John Hyre Cincinnati, OH 45236	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Managing Principal	\$25.00	\$100.00	
1/22/2010	John Hyre Cincinnati, OH 45236	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Managing Principal	\$25.00	\$100.00	
3/5/2010	Joseph Switala Pittsburgh, PA 15212	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Resident Construction Manager	\$25.00	\$100.00	
2/5/2010	Joseph Switala Pittsburgh, PA 15212	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Resident Construction Manager	\$25.00	\$100.00	
1/22/2010	Joseph Switala Pittsburgh, PA 15212	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Resident Construction Manager	\$25.00	\$100.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
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to whole dollars.

SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	01/01/2010	
through	03/17/2010	Page 39 of 182
NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/8/2010	Joseph Switala Pittsburgh, PA 15212	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Resident Construction Manager	\$25.00	\$100.00	
1/22/2010	Joyce Mariani White Plains, NY 10605	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Vice President	\$25.00	\$100.00	
2/5/2010	Joyce Mariani White Plains, NY 10605	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Vice President	\$25.00	\$100.00	
1/8/2010	Joyce Mariani White Plains, NY 10605	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Vice President	\$25.00	\$100.00	
3/5/2010	Joyce Mariani White Plains, NY 10605	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Vice President	\$25.00	\$100.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>01/01/2010</u>		CALIFORNIA FORM 460
through <u>03/17/2010</u>		
		Page <u>40</u> of <u>182</u>
		I.D. Number 860346

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
HDR, Inc. PAC

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/8/2010	Julie Hellmann Huntersville, NC 28078	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Water Marketing Manager	\$25.00	\$100.00	
2/5/2010	Julie Hellmann Huntersville, NC 28078	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Water Marketing Manager	\$25.00	\$100.00	
3/5/2010	Julie Hellmann Huntersville, NC 28078	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Water Marketing Manager	\$25.00	\$100.00	
1/22/2010	Julie Hellmann Huntersville, NC 28078	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Water Marketing Manager	\$25.00	\$100.00	
2/5/2010	Kenneth Aducci Virginia Beach, VA 23456	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Department Manager/ Vp	\$25.00	\$100.00	
SUBTOTAL						

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OTH - Other
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Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
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SCHEDULE A (CONT.)

Statement covers period from 01/01/2010 through 03/17/2010		CALIFORNIA FORM 460 Page 41 of 182
I.D. Number 860346		

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

HDR, Inc. PAC

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/8/2010	Kenneth Aducci Virginia Beach, VA 23456	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Department Manager/ Vp	\$25.00	\$100.00	
1/22/2010	Kenneth Aducci Virginia Beach, VA 23456	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Department Manager/ Vp	\$25.00	\$100.00	
3/5/2010	Kenneth Aducci Virginia Beach, VA 23456	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Department Manager/ Vp	\$25.00	\$100.00	
1/22/2010	Kenneth Choffel Austin, TX 78731	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Senior Project Manager	\$25.00	\$100.00	
3/5/2010	Kenneth Choffel Austin, TX 78731	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Senior Project Manager	\$25.00	\$100.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	01/01/2010	
through	03/17/2010	Page 42 of 182
NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/5/2010	Kenneth Choffel Austin, TX 78731	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Senior Project Manager	\$25.00	\$100.00	
1/8/2010	Kenneth Choffel Austin, TX 78731	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Senior Project Manager	\$25.00	\$100.00	
1/8/2010	Kenneth Hartmann Valrico, FL 33594	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Fl Transportation Program Mgr	\$25.00	\$100.00	
2/5/2010	Kenneth Hartmann Valrico, FL 33594	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Fl Transportation Program Mgr	\$25.00	\$100.00	
1/22/2010	Kenneth Hartmann Valrico, FL 33594	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Fl Transportation Program Mgr	\$25.00	\$100.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	01/01/2010	
through	03/17/2010	Page 43 of 182
NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
3/5/2010	Kenneth Hartmann Valrico, FL 33594	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Fl Transportation Program Mgr	\$25.00	\$100.00	
3/5/2010	Kenneth Smith Phoenix, AZ 85044	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc West Reg Transpo Dir - Constr	\$25.00	\$100.00	
2/5/2010	Kenneth Smith Phoenix, AZ 85044	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc West Reg Transpo Dir - Constr	\$25.00	\$100.00	
1/22/2010	Kenneth Smith Phoenix, AZ 85044	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc West Reg Transpo Dir - Constr	\$25.00	\$100.00	
1/8/2010	Kenneth Smith Phoenix, AZ 85044	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc West Reg Transpo Dir - Constr	\$25.00	\$100.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>01/01/2010</u>		CALIFORNIA FORM 460
through <u>03/17/2010</u>		
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NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

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DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/22/2010	Kent Mcwaters Palm Harbor, FL 34685	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Transportation Group Manager	\$25.00	\$100.00	
3/5/2010	Kent Mcwaters Palm Harbor, FL 34685	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Transportation Group Manager	\$25.00	\$100.00	
2/5/2010	Kent Mcwaters Palm Harbor, FL 34685	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Transportation Group Manager	\$25.00	\$100.00	
1/8/2010	Kent Mcwaters Palm Harbor, FL 34685	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Transportation Group Manager	\$25.00	\$100.00	
1/22/2010	Kevin Delange Montvale, NJ 07645	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Senior Marketing Manager	\$25.00	\$100.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	01/01/2010	
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NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/5/2010	Kevin Delange Montvale, NJ 07645	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Senior Marketing Manager	\$25.00	\$100.00	
1/8/2010	Kevin Delange Montvale, NJ 07645	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Senior Marketing Manager	\$25.00	\$100.00	
3/5/2010	Kevin Delange Montvale, NJ 07645	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Senior Marketing Manager	\$25.00	\$100.00	
3/5/2010	Kirk Stull Raleigh, NC 27613	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Section Mgr Planning Proj Dev	\$25.00	\$100.00	
1/22/2010	Kirk Stull Raleigh, NC 27613	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Section Mgr Planning Proj Dev	\$25.00	\$100.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>01/01/2010</u>		CALIFORNIA FORM 460
through <u>03/17/2010</u>		
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		I.D. Number 860346

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
HDR, Inc. PAC

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/5/2010	Kirk Stull Raleigh, NC 27613	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Section Mgr Planning Proj Dev	\$25.00	\$100.00	
1/8/2010	Kirk Stull Raleigh, NC 27613	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Section Mgr Planning Proj Dev	\$25.00	\$100.00	
2/5/2010	Kristine Shaner Papillion, NE 68046	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc National Pursuit Leader, E&rm	\$25.00	\$100.00	
1/8/2010	Kristine Shaner Papillion, NE 68046	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc National Pursuit Leader, E&rm	\$25.00	\$100.00	
1/22/2010	Kristine Shaner Papillion, NE 68046	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc National Pursuit Leader, E&rm	\$25.00	\$100.00	
SUBTOTAL						

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IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	01/01/2010	
through	03/17/2010	Page 47 of 182
NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
3/5/2010	Kristine Shaner Papillion, NE 68046	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc National Pursuit Leader, E&rm	\$25.00	\$100.00	
2/5/2010	Larry Low Safety Harbor, FL 34695	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Managing Pncpl/fl Trans Bgmgr	\$25.00	\$100.00	
3/5/2010	Larry Low Safety Harbor, FL 34695	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Managing Pncpl/fl Trans Bgmgr	\$25.00	\$100.00	
1/22/2010	Larry Low Safety Harbor, FL 34695	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Managing Pncpl/fl Trans Bgmgr	\$25.00	\$100.00	
1/8/2010	Larry Low Safety Harbor, FL 34695	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Managing Pncpl/fl Trans Bgmgr	\$25.00	\$100.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>01/01/2010</u>		CALIFORNIA FORM 460
through <u>03/17/2010</u>		
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NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/8/2010	Lawrence Kyle Issaquah, WA 98027	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Department Manager	\$25.00	\$100.00	
1/22/2010	Lawrence Kyle Issaquah, WA 98027	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Department Manager	\$25.00	\$100.00	
2/5/2010	Lawrence Kyle Issaquah, WA 98027	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Department Manager	\$25.00	\$100.00	
3/5/2010	Lawrence Kyle Issaquah, WA 98027	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Department Manager	\$25.00	\$100.00	
3/5/2010	Lester Fukuda Honolulu, HI 96816	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Sr. Project Manager	\$25.00	\$100.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>01/01/2010</u> through <u>03/17/2010</u>		CALIFORNIA FORM 460
Page <u>49</u> of <u>182</u>		
NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/8/2010	Lester Fukuda Honolulu, HI 96816	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Sr. Project Manager	\$25.00	\$100.00	
2/5/2010	Lester Fukuda Honolulu, HI 96816	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Sr. Project Manager	\$25.00	\$100.00	
1/22/2010	Lester Fukuda Honolulu, HI 96816	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Sr. Project Manager	\$25.00	\$100.00	
3/5/2010	Lisa Wheatly Castle Rock, CO 80108	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Dir Client Development Transp	\$25.00	\$100.00	
1/8/2010	Lisa Wheatly Castle Rock, CO 80108	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Dir Client Development Transp	\$25.00	\$100.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>01/01/2010</u>		CALIFORNIA FORM 460
through <u>03/17/2010</u>		
		Page <u>50</u> of <u>182</u>
		I.D. Number 860346

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
HDR, Inc. PAC

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/5/2010	Lisa Wheatly Castle Rock, CO 80108	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Dir Client Development Transp	\$25.00	\$100.00	
1/22/2010	Lisa Wheatly Castle Rock, CO 80108	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Dir Client Development Transp	\$25.00	\$100.00	
2/5/2010	Marilyn Jackson Tampa, FL 33609	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Section Manager - Row / Vp	\$25.00	\$100.00	
1/22/2010	Marilyn Jackson Tampa, FL 33609	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Section Manager - Row / Vp	\$25.00	\$100.00	
1/8/2010	Marilyn Jackson Tampa, FL 33609	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Section Manager - Row / Vp	\$25.00	\$100.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	01/01/2010	
through	03/17/2010	Page 51 of 182
NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
3/5/2010	Marilyn Jackson Tampa, FL 33609	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Section Manager - Row / Vp	\$25.00	\$100.00	
1/8/2010	Mark Dalton Anchorage, AK 99517	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Department Manager	\$25.00	\$100.00	
1/22/2010	Mark Dalton Anchorage, AK 99517	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Department Manager	\$25.00	\$100.00	
3/5/2010	Mark Dalton Anchorage, AK 99517	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Department Manager	\$25.00	\$100.00	
2/5/2010	Mark Dalton Anchorage, AK 99517	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Department Manager	\$25.00	\$100.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>01/01/2010</u> through <u>03/17/2010</u>		CALIFORNIA FORM 460
Page <u>52</u> of <u>182</u>		
NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/5/2010	Mark Hunsicker Omaha, NE 68112	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Ferm Client Development Mgr	\$25.00	\$100.00	
3/5/2010	Mark Hunsicker Omaha, NE 68112	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Ferm Client Development Mgr	\$25.00	\$100.00	
1/8/2010	Mark Hunsicker Omaha, NE 68112	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Ferm Client Development Mgr	\$25.00	\$100.00	
1/22/2010	Mark Hunsicker Omaha, NE 68112	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Ferm Client Development Mgr	\$25.00	\$100.00	
1/22/2010	Mary Wees Omaha, NE 68164	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Project Management And Q A Dir	\$25.00	\$100.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	01/01/2010	
through	03/17/2010	Page 53 of 182
NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
3/5/2010	Mary Wees Omaha, NE 68164	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Project Management And Q A Dir	\$25.00	\$100.00	
2/5/2010	Mary Wees Omaha, NE 68164	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Project Management And Q A Dir	\$25.00	\$100.00	
1/8/2010	Mary Wees Omaha, NE 68164	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Project Management And Q A Dir	\$25.00	\$100.00	
1/8/2010	Matthew Beckingham Fox Island, WA 98333	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Reg Dir Of Commis/facility Srv	\$25.00	\$100.00	
1/22/2010	Matthew Beckingham Fox Island, WA 98333	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Reg Dir Of Commis/facility Srv	\$25.00	\$100.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	01/01/2010	
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NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

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DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/5/2010	Matthew Beckingham Fox Island, WA 98333	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Reg Dir Of Commis/facility Srv	\$25.00	\$100.00	
3/5/2010	Matthew Beckingham Fox Island, WA 98333	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Reg Dir Of Commis/facility Srv	\$25.00	\$100.00	
3/5/2010	Michael Barton Tucson, AZ 85746	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Transportation Section Manager	\$25.00	\$100.00	
1/22/2010	Michael Barton Tucson, AZ 85746	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Transportation Section Manager	\$25.00	\$100.00	
1/8/2010	Michael Barton Tucson, AZ 85746	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Transportation Section Manager	\$25.00	\$100.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	01/01/2010	
through	03/17/2010	Page 55 of 182
NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

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DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/5/2010	Michael Barton Tucson, AZ 85746	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Transportation Section Manager	\$25.00	\$100.00	
3/5/2010	Michael Brenchley Dallas, TX 75248	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Director Alternative Delivery	\$25.00	\$100.00	
1/22/2010	Michael Brenchley Dallas, TX 75248	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Director Alternative Delivery	\$25.00	\$100.00	
2/5/2010	Michael Brenchley Dallas, TX 75248	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Director Alternative Delivery	\$25.00	\$100.00	
1/8/2010	Michael Brenchley Dallas, TX 75248	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Director Alternative Delivery	\$25.00	\$100.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>01/01/2010</u>		CALIFORNIA FORM 460
through <u>03/17/2010</u>		
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NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

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DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
3/5/2010	Michael Dingwell Omaha, NE 68134	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Controller-eng Co Svp	\$25.00	\$100.00	
1/22/2010	Michael Dingwell Omaha, NE 68134	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Controller-eng Co Svp	\$25.00	\$100.00	
2/5/2010	Michael Dingwell Omaha, NE 68134	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Controller-eng Co Svp	\$25.00	\$100.00	
1/8/2010	Michael Dingwell Omaha, NE 68134	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Controller-eng Co Svp	\$25.00	\$100.00	
2/5/2010	Michael Johnson Tucson, AZ 85719	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Senior Engineer Vp	\$25.00	\$100.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	01/01/2010	
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NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

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DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/22/2010	Michael Johnson Tucson, AZ 85719	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Senior Engineer Vp	\$25.00	\$100.00	
1/8/2010	Michael Johnson Tucson, AZ 85719	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Senior Engineer Vp	\$25.00	\$100.00	
3/5/2010	Michael Johnson Tucson, AZ 85719	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Senior Engineer Vp	\$25.00	\$100.00	
1/22/2010	Michael Loo Chandler, AZ 85248	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Senior Resident Engineer	\$25.00	\$100.00	
1/8/2010	Michael Loo Chandler, AZ 85248	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Senior Resident Engineer	\$25.00	\$100.00	
SUBTOTAL						

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IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	01/01/2010	
through	03/17/2010	Page 58 of 182
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
HDR, Inc. PAC

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/5/2010	Michael Loo Chandler, AZ 85248	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Senior Resident Engineer	\$25.00	\$100.00	
3/5/2010	Michael Loo Chandler, AZ 85248	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Senior Resident Engineer	\$25.00	\$100.00	
3/5/2010	Michael Siedschlag Omaha, NE 68154	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Sr. Marketing Manager	\$25.00	\$100.00	
1/8/2010	Michael Siedschlag Omaha, NE 68154	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Sr. Marketing Manager	\$25.00	\$100.00	
2/5/2010	Michael Siedschlag Omaha, NE 68154	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Sr. Marketing Manager	\$25.00	\$100.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	01/01/2010	
through	03/17/2010	Page 59 of 182

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER HDR, Inc. PAC	I.D. Number 860346
--------------------------------	-----------------------

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/22/2010	Michael Siedschlag Omaha, NE 68154	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Sr. Marketing Manager	\$25.00	\$100.00	
3/5/2010	Paul Cooke Huntersville, NC 28078	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Mgr-dept	\$25.00	\$100.00	
2/5/2010	Paul Cooke Huntersville, NC 28078	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Mgr-dept	\$25.00	\$100.00	
1/8/2010	Paul Cooke Huntersville, NC 28078	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Mgr-dept	\$25.00	\$100.00	
1/22/2010	Paul Cooke Huntersville, NC 28078	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Mgr-dept	\$25.00	\$100.00	

SUBTOTAL

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	01/01/2010	
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NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/5/2010	Peter McGroddy Upper Nyack, NY 10960	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Department Manager	\$25.00	\$100.00	
1/22/2010	Peter McGroddy Upper Nyack, NY 10960	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Department Manager	\$25.00	\$100.00	
1/8/2010	Peter McGroddy Upper Nyack, NY 10960	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Department Manager	\$25.00	\$100.00	
3/5/2010	Peter McGroddy Upper Nyack, NY 10960	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Department Manager	\$25.00	\$100.00	
1/22/2010	R Olson Kenmore, WA 98028	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Nw Area Marketing Manager	\$25.00	\$100.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>01/01/2010</u> through <u>03/17/2010</u>		CALIFORNIA FORM 460
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NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/5/2010	R Olson Kenmore, WA 98028	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Nw Area Marketing Manager	\$25.00	\$100.00	
1/8/2010	R Olson Kenmore, WA 98028	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Nw Area Marketing Manager	\$25.00	\$100.00	
3/5/2010	R Olson Kenmore, WA 98028	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Nw Area Marketing Manager	\$25.00	\$100.00	
2/5/2010	Ricardo Calvo Lutz, FL 33549	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Marketing Manager-florida E&rm	\$25.00	\$100.00	
1/22/2010	Ricardo Calvo Lutz, FL 33549	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Marketing Manager-florida E&rm	\$25.00	\$100.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
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NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/8/2010	Ricardo Calvo Lutz, FL 33549	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Marketing Manager-florida E&rm	\$25.00	\$100.00	
3/5/2010	Ricardo Calvo Lutz, FL 33549	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Marketing Manager-florida E&rm	\$25.00	\$100.00	
2/5/2010	Robert Anderson Lexington, KY 40505	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Vice President	\$25.00	\$100.00	
1/8/2010	Robert Anderson Lexington, KY 40505	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Vice President	\$25.00	\$100.00	
1/22/2010	Robert Anderson Lexington, KY 40505	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Vice President	\$25.00	\$100.00	

SUBTOTAL

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	01/01/2010	
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NAME OF FILER
HDR, Inc. PAC

I.D. Number
860346

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
3/5/2010	Robert Anderson Lexington, KY 40505	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Vice President	\$25.00	\$100.00	
3/5/2010	Robert Beduhn Omaha, NE 68154	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Natl Dir Water Res & Fisheries	\$25.00	\$100.00	
2/5/2010	Robert Beduhn Omaha, NE 68154	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Natl Dir Water Res & Fisheries	\$25.00	\$100.00	
1/8/2010	Robert Beduhn Omaha, NE 68154	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Natl Dir Water Res & Fisheries	\$25.00	\$100.00	
1/22/2010	Robert Beduhn Omaha, NE 68154	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Natl Dir Water Res & Fisheries	\$25.00	\$100.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>01/01/2010</u>		CALIFORNIA FORM 460
through <u>03/17/2010</u>		
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NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/22/2010	Robert Clair Meggett, SC 29449	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Sc Program Manager	\$25.00	\$100.00	
1/8/2010	Robert Clair Meggett, SC 29449	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Sc Program Manager	\$25.00	\$100.00	
3/5/2010	Robert Clair Meggett, SC 29449	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Sc Program Manager	\$25.00	\$100.00	
2/5/2010	Robert Clair Meggett, SC 29449	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Sc Program Manager	\$25.00	\$100.00	
3/5/2010	Robert Ellis Danville, CA 94506	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc West Region Water Supply Lead	\$25.00	\$100.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>01/01/2010</u>		CALIFORNIA FORM 460
through <u>03/17/2010</u>		
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		I.D. Number 860346

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DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/5/2010	Robert Ellis Danville, CA 94506	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc West Region Water Supply Lead	\$25.00	\$100.00	
1/8/2010	Robert Ellis Danville, CA 94506	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc West Region Water Supply Lead	\$25.00	\$100.00	
1/22/2010	Robert Ellis Danville, CA 94506	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc West Region Water Supply Lead	\$25.00	\$100.00	
3/5/2010	Robert Kellner Pensacola Beach, FL 32561	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Project Principal Engineer	\$25.00	\$100.00	
1/22/2010	Robert Kellner Pensacola Beach, FL 32561	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Project Principal Engineer	\$25.00	\$100.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>01/01/2010</u>		CALIFORNIA FORM 460
through <u>03/17/2010</u>		
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2/5/2010	Robert Kellner Pensacola Beach, FL 32561	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Project Principal Engineer	\$25.00	\$100.00	
1/8/2010	Robert Kellner Pensacola Beach, FL 32561	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Project Principal Engineer	\$25.00	\$100.00	
1/22/2010	Robert Klovsky Rancho Santa Margari, CA 92688	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Business Class Area Mgr-rail	\$25.00	\$100.00	
2/5/2010	Robert Klovsky Rancho Santa Margari, CA 92688	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Business Class Area Mgr-rail	\$25.00	\$100.00	
1/8/2010	Robert Klovsky Rancho Santa Margari, CA 92688	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Business Class Area Mgr-rail	\$25.00	\$100.00	
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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
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NAME OF FILER
HDR, Inc. PAC

I.D. Number
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3/5/2010	Robert Klovsky Rancho Santa Margari, CA 92688	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Business Class Area Mgr-rail	\$25.00	\$100.00	
3/5/2010	Robert Leahey Austin, TX 78746	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Roadway Group Leader	\$25.00	\$100.00	
1/22/2010	Robert Leahey Austin, TX 78746	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Roadway Group Leader	\$25.00	\$100.00	
2/5/2010	Robert Leahey Austin, TX 78746	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Roadway Group Leader	\$25.00	\$100.00	
1/8/2010	Robert Leahey Austin, TX 78746	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Roadway Group Leader	\$25.00	\$100.00	
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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
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1/8/2010	Robert Yechout Omaha, NE 68157	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc U P R R Client Manager	\$25.00	\$100.00	
2/5/2010	Robert Yechout Omaha, NE 68157	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc U P R R Client Manager	\$25.00	\$100.00	
3/5/2010	Robert Yechout Omaha, NE 68157	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc U P R R Client Manager	\$25.00	\$100.00	
1/22/2010	Robert Yechout Omaha, NE 68157	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc U P R R Client Manager	\$25.00	\$100.00	
1/22/2010	Roger Moody Rock Hill, SC 29732	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Section Manager, Transportatio	\$25.00	\$100.00	

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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
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NAME OF FILER HDR, Inc. PAC	I.D. Number 860346
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DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/5/2010	Roger Moody Rock Hill, SC 29732	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Section Manager, Transportatio	\$25.00	\$100.00	
1/8/2010	Roger Moody Rock Hill, SC 29732	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Section Manager, Transportatio	\$25.00	\$100.00	
3/5/2010	Roger Moody Rock Hill, SC 29732	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Section Manager, Transportatio	\$25.00	\$100.00	
1/8/2010	Roger Stewart Cupertino, CA 95014	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Dir Of Civic Program	\$25.00	\$100.00	
3/5/2010	Roger Stewart Cupertino, CA 95014	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Dir Of Civic Program	\$25.00	\$100.00	
SUBTOTAL						

*Contributor Codes
IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	01/01/2010	
through	03/17/2010	Page 70 of 182
NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/5/2010	Roger Stewart Cupertino, CA 95014	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Dir Of Civic Program	\$25.00	\$100.00	
1/22/2010	Roger Stewart Cupertino, CA 95014	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Dir Of Civic Program	\$25.00	\$100.00	
1/8/2010	Steven Bergman Loveland, OH 45140	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Marketing Manager-ohio Transp	\$25.00	\$100.00	
1/22/2010	Steven Bergman Loveland, OH 45140	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Marketing Manager-ohio Transp	\$25.00	\$100.00	
3/5/2010	Steven Bergman Loveland, OH 45140	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Marketing Manager-ohio Transp	\$25.00	\$100.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>01/01/2010</u>		CALIFORNIA FORM 460
through <u>03/17/2010</u>		
		Page <u>71</u> of <u>182</u>
NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/5/2010	Steven Bergman Loveland, OH 45140	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Marketing Manager-ohio Transp	\$25.00	\$100.00	
1/22/2010	Steven Goe San Diego, CA 92130	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc West Region Mngr-prinicpal-svp	\$25.00	\$100.00	
1/8/2010	Steven Goe San Diego, CA 92130	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc West Region Mngr-prinicpal-svp	\$25.00	\$100.00	
3/5/2010	Steven Goe San Diego, CA 92130	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc West Region Mngr-prinicpal-svp	\$25.00	\$100.00	
2/5/2010	Steven Goe San Diego, CA 92130	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc West Region Mngr-prinicpal-svp	\$25.00	\$100.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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to whole dollars.

SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	01/01/2010	
through	03/17/2010	Page 72 of 182

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
HDR, Inc. PAC

I.D. Number
860346

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/8/2010	Steven Hill Omaha, NE 68116	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Natl Federal Facilities Dir	\$25.00	\$100.00	
1/22/2010	Steven Hill Omaha, NE 68116	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Natl Federal Facilities Dir	\$25.00	\$100.00	
3/5/2010	Steven Hill Omaha, NE 68116	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Natl Federal Facilities Dir	\$25.00	\$100.00	
2/5/2010	Steven Hill Omaha, NE 68116	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Natl Federal Facilities Dir	\$25.00	\$100.00	
1/22/2010	Steven Keyes Winter Park, FL 32789	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc So Central Ferm Bg Director	\$25.00	\$100.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	01/01/2010	
through	03/17/2010	Page 73 of 182

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER HDR, Inc. PAC	I.D. Number 860346
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DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/5/2010	Steven Keyes Winter Park, FL 32789	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc So Central Farm Bg Director	\$25.00	\$100.00	
3/5/2010	Steven Keyes Winter Park, FL 32789	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc So Central Farm Bg Director	\$25.00	\$100.00	
1/8/2010	Steven Keyes Winter Park, FL 32789	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc So Central Farm Bg Director	\$25.00	\$100.00	
1/8/2010	Theodore Zsirai Herndon, VA 20171	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Team Leader Mechanical	\$25.00	\$100.00	
1/22/2010	Theodore Zsirai Herndon, VA 20171	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Team Leader Mechanical	\$25.00	\$100.00	

SUBTOTAL

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	01/01/2010	
through	03/17/2010	Page 74 of 182

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
HDR, Inc. PAC

I.D. Number
860346

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/5/2010	Theodore Zsirai Herndon, VA 20171	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Team Leader Mechanical	\$25.00	\$100.00	
3/5/2010	Theodore Zsirai Herndon, VA 20171	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Team Leader Mechanical	\$25.00	\$100.00	
1/8/2010	Thomas Smithberger Falls Church, VA 22046	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc National Director-railroads	\$25.00	\$100.00	
3/5/2010	Thomas Smithberger Falls Church, VA 22046	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc National Director-railroads	\$25.00	\$100.00	
2/5/2010	Thomas Smithberger Falls Church, VA 22046	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc National Director-railroads	\$25.00	\$100.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
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to whole dollars.

SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	01/01/2010	
through	03/17/2010	Page 75 of 182

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER HDR, Inc. PAC	I.D. Number 860346
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DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/22/2010	Thomas Smithberger Falls Church, VA 22046	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc National Director-railroads	\$25.00	\$100.00	
1/8/2010	Thomas Vandever Arlington, VA 22202	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Managing Principal	\$25.00	\$100.00	
3/5/2010	Thomas Vandever Arlington, VA 22202	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Managing Principal	\$25.00	\$100.00	
1/22/2010	Thomas Vandever Arlington, VA 22202	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Managing Principal	\$25.00	\$100.00	
2/5/2010	Thomas Vandever Arlington, VA 22202	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Managing Principal	\$25.00	\$100.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
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SCHEDULE A (CONT.)

Statement covers period from 01/01/2010 through 03/17/2010		CALIFORNIA FORM 460 Page 76 of 182
I.D. Number 860346		

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
HDR, Inc. PAC

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
3/5/2010	Timothy Fleming Folsom, CA 95630	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Northern Ca Area Manager	\$25.00	\$100.00	
2/5/2010	Timothy Fleming Folsom, CA 95630	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Northern Ca Area Manager	\$25.00	\$100.00	
1/22/2010	Timothy Fleming Folsom, CA 95630	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Northern Ca Area Manager	\$25.00	\$100.00	
1/8/2010	Timothy Fleming Folsom, CA 95630	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Northern Ca Area Manager	\$25.00	\$100.00	
1/22/2010	Werner Mueller Warwick, NY 10990	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Ne Erm Bg Director	\$25.00	\$100.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>01/01/2010</u> through <u>03/17/2010</u>		CALIFORNIA FORM 460
Page <u>77</u> of <u>182</u>		
NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/8/2010	Werner Mueller Warwick, NY 10990	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Ne Erm Bg Director	\$25.00	\$100.00	
3/5/2010	Werner Mueller Warwick, NY 10990	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Ne Erm Bg Director	\$25.00	\$100.00	
2/5/2010	Werner Mueller Warwick, NY 10990	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Ne Erm Bg Director	\$25.00	\$100.00	
3/5/2010	William Hagood Dallas, TX 75230	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Sr. Marketing Manager	\$25.00	\$100.00	
2/5/2010	William Hagood Dallas, TX 75230	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Sr. Marketing Manager	\$25.00	\$100.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	01/01/2010	
through	03/17/2010	Page 78 of 182
NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/8/2010	William Hagood Dallas, TX 75230	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Sr. Marketing Manager	\$25.00	\$100.00	
1/22/2010	William Hagood Dallas, TX 75230	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Sr. Marketing Manager	\$25.00	\$100.00	
1/8/2010	William Sharp Omaha, NE 68127	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Section Manager - Roadway	\$25.00	\$100.00	
1/22/2010	William Sharp Omaha, NE 68127	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Section Manager - Roadway	\$25.00	\$100.00	
3/5/2010	William Sharp Omaha, NE 68127	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Section Manager - Roadway	\$25.00	\$100.00	

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>01/01/2010</u>		CALIFORNIA FORM 460
through <u>03/17/2010</u>		
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NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

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2/5/2010	William Sharp Omaha, NE 68127	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Section Manager - Roadway	\$25.00	\$100.00	
1/8/2010	Bassam Abi-samra Carlsbad, CA 92010	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Area Business Group Mgr. Water	\$30.00	\$120.00	
1/22/2010	Bassam Abi-samra Carlsbad, CA 92010	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Area Business Group Mgr. Water	\$30.00	\$120.00	
2/5/2010	Bassam Abi-samra Carlsbad, CA 92010	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Area Business Group Mgr. Water	\$30.00	\$120.00	
3/5/2010	Bassam Abi-samra Carlsbad, CA 92010	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Area Business Group Mgr. Water	\$30.00	\$120.00	
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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>01/01/2010</u>		CALIFORNIA FORM 460
through <u>03/17/2010</u>		
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NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

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2/5/2010	Betty Dehoney La Jolla, CA 92037	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Deputy Project Manager-bdcp	\$30.00	\$120.00	
1/8/2010	Betty Dehoney La Jolla, CA 92037	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Deputy Project Manager-bdcp	\$30.00	\$120.00	
1/22/2010	Betty Dehoney La Jolla, CA 92037	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Deputy Project Manager-bdcp	\$30.00	\$120.00	
3/5/2010	Betty Dehoney La Jolla, CA 92037	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Deputy Project Manager-bdcp	\$30.00	\$120.00	
2/5/2010	Brian Leshko Pittsburgh, PA 15218	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Nat'l Bridge Insp Program Lead	\$30.00	\$120.00	
SUBTOTAL						

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OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	01/01/2010	
through	03/17/2010	Page 81 of 182
NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/8/2010	Brian Leshko Pittsburgh, PA 15218	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Nat'l Bridge Insp Program Lead	\$30.00	\$120.00	
3/5/2010	Brian Leshko Pittsburgh, PA 15218	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Nat'l Bridge Insp Program Lead	\$30.00	\$120.00	
1/22/2010	Brian Leshko Pittsburgh, PA 15218	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Nat'l Bridge Insp Program Lead	\$30.00	\$120.00	
1/22/2010	David Connelly Columbus, OH 43221	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Area Bg Dir-northeast Water	\$30.00	\$120.00	
3/5/2010	David Connelly Columbus, OH 43221	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Area Bg Dir-northeast Water	\$30.00	\$120.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from 01/01/2010 through 03/17/2010		CALIFORNIA FORM 460 Page 82 of 182
I.D. Number 860346		

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
HDR, Inc. PAC

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/8/2010	David Connelly Columbus, OH 43221	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Area Bg Dir-northeast Water	\$30.00	\$120.00	
2/5/2010	David Connelly Columbus, OH 43221	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Area Bg Dir-northeast Water	\$30.00	\$120.00	
2/5/2010	David Keil Boise, ID 83712	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc W/www Section Manager	\$30.00	\$120.00	
3/5/2010	David Keil Boise, ID 83712	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc W/www Section Manager	\$30.00	\$120.00	
1/22/2010	David Keil Boise, ID 83712	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc W/www Section Manager	\$30.00	\$120.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from 01/01/2010 through 03/17/2010		CALIFORNIA FORM 460
Page 83 of 182		
NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/8/2010	David Keil Boise, ID 83712	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc W/ww Section Manager	\$30.00	\$120.00	
3/5/2010	Debra Sanders Omaha, NE 68114	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Dir Consulting/manag Prin Svp	\$30.00	\$120.00	
1/8/2010	Debra Sanders Omaha, NE 68114	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Dir Consulting/manag Prin Svp	\$30.00	\$120.00	
1/22/2010	Debra Sanders Omaha, NE 68114	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Dir Consulting/manag Prin Svp	\$30.00	\$120.00	
2/5/2010	Debra Sanders Omaha, NE 68114	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Dir Consulting/manag Prin Svp	\$30.00	\$120.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>01/01/2010</u> through <u>03/17/2010</u>		CALIFORNIA FORM 460
Page <u>84</u> of <u>182</u>		
NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
3/5/2010	Edward Power Virginia Bch, VA 23454	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Transp Bus Grp Dir - E Region	\$30.00	\$120.00	
1/8/2010	Edward Power Virginia Bch, VA 23454	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Transp Bus Grp Dir - E Region	\$30.00	\$120.00	
2/5/2010	Edward Power Virginia Bch, VA 23454	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Transp Bus Grp Dir - E Region	\$30.00	\$120.00	
1/22/2010	Edward Power Virginia Bch, VA 23454	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Transp Bus Grp Dir - E Region	\$30.00	\$120.00	
3/5/2010	George Woolwine Lexington, KY 40502	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Marketing Manager-kentucky	\$30.00	\$120.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from 01/01/2010 through 03/17/2010		CALIFORNIA FORM 460 Page 85 of 182
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
HDR, Inc. PAC

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/22/2010	George Woolwine Lexington, KY 40502	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Marketing Manager-kentucky	\$30.00	\$120.00	
2/5/2010	George Woolwine Lexington, KY 40502	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Marketing Manager-kentucky	\$30.00	\$120.00	
1/8/2010	George Woolwine Lexington, KY 40502	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Marketing Manager-kentucky	\$30.00	\$120.00	
3/5/2010	Glen Ellmers Cary, NC 27513	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Water Business Group Reg Dir	\$30.00	\$120.00	
2/5/2010	Glen Ellmers Cary, NC 27513	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Water Business Group Reg Dir	\$30.00	\$120.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from 01/01/2010 through 03/17/2010		CALIFORNIA FORM 460
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NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/8/2010	Glen Ellmers Cary, NC 27513	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Water Business Group Reg Dir	\$30.00	\$120.00	
1/22/2010	Glen Ellmers Cary, NC 27513	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Water Business Group Reg Dir	\$30.00	\$120.00	
1/8/2010	Guillermo Garcia Mission Viejo, CA 92691	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Sr Project Manager	\$30.00	\$120.00	
3/5/2010	Guillermo Garcia Mission Viejo, CA 92691	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Sr Project Manager	\$30.00	\$120.00	
1/22/2010	Guillermo Garcia Mission Viejo, CA 92691	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Sr Project Manager	\$30.00	\$120.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>01/01/2010</u>		CALIFORNIA FORM 460
through <u>03/17/2010</u>		
Page <u>87</u> of <u>182</u>		I.D. Number 860346

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

HDR, Inc. PAC

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/5/2010	Guillermo Garcia Mission Viejo, CA 92691	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Sr Project Manager	\$30.00	\$120.00	
1/8/2010	Gus Ardura Alexandria, VA 22311	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc National Federal Director	\$30.00	\$120.00	
3/5/2010	Gus Ardura Alexandria, VA 22311	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc National Federal Director	\$30.00	\$120.00	
2/5/2010	Gus Ardura Alexandria, VA 22311	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc National Federal Director	\$30.00	\$120.00	
1/22/2010	Gus Ardura Alexandria, VA 22311	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc National Federal Director	\$30.00	\$120.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>01/01/2010</u>		CALIFORNIA FORM 460
through <u>03/17/2010</u>		
		Page <u>88</u> of <u>182</u>
NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

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DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/5/2010	James Langlois Charlotte, NC 28277	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Dept Manager	\$30.00	\$120.00	
1/22/2010	James Langlois Charlotte, NC 28277	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Dept Manager	\$30.00	\$120.00	
3/5/2010	James Langlois Charlotte, NC 28277	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Dept Manager	\$30.00	\$120.00	
1/8/2010	James Langlois Charlotte, NC 28277	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Dept Manager	\$30.00	\$120.00	
1/8/2010	Jan Mazgaj Omaha, NE 68144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Natl Dir Solid Waste & Industr	\$30.00	\$120.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from 01/01/2010		CALIFORNIA FORM 460
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NAME OF FILER
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2/5/2010	Jan Mazgaj Omaha, NE 68144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Natl Dir Solid Waste & Industr	\$30.00	\$120.00	
1/22/2010	Jan Mazgaj Omaha, NE 68144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Natl Dir Solid Waste & Industr	\$30.00	\$120.00	
3/5/2010	Jan Mazgaj Omaha, NE 68144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Natl Dir Solid Waste & Industr	\$30.00	\$120.00	
2/5/2010	Jeffery Labenz-hough San Antonio, TX 78248	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Federal Program Marketing Mgr	\$30.00	\$120.00	
1/8/2010	Jeffery Labenz-hough San Antonio, TX 78248	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Federal Program Marketing Mgr	\$30.00	\$120.00	
SUBTOTAL						

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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	01/01/2010	
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NAME OF FILER
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I.D. Number
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1/22/2010	Jeffery Labenz-hough San Antonio, TX 78248	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Federal Program Marketing Mgr	\$30.00	\$120.00	
3/5/2010	Jeffery Labenz-hough San Antonio, TX 78248	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Federal Program Marketing Mgr	\$30.00	\$120.00	
3/5/2010	Jeffrey Berk Mission Viejo, CA 92691	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Senior Marketing Manager	\$30.00	\$120.00	
1/22/2010	Jeffrey Berk Mission Viejo, CA 92691	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Senior Marketing Manager	\$30.00	\$120.00	
2/5/2010	Jeffrey Berk Mission Viejo, CA 92691	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Senior Marketing Manager	\$30.00	\$120.00	
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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	01/01/2010	
through	03/17/2010	Page 91 of 182

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I.D. Number
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1/8/2010	Jeffrey Berk Mission Viejo, CA 92691	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Senior Marketing Manager	\$30.00	\$120.00	
1/22/2010	Jeffrey Han Roslyn Heights, NY 11577	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Structures Section Mgr	\$30.00	\$120.00	
3/5/2010	Jeffrey Han Roslyn Heights, NY 11577	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Structures Section Mgr	\$30.00	\$120.00	
1/8/2010	Jeffrey Han Roslyn Heights, NY 11577	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Structures Section Mgr	\$30.00	\$120.00	
2/5/2010	Jeffrey Han Roslyn Heights, NY 11577	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Structures Section Mgr	\$30.00	\$120.00	
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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	01/01/2010	
through	03/17/2010	Page 92 of 182
NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/8/2010	Joe Lewis Georgetown, KY 40324	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Vice President	\$30.00	\$120.00	
2/5/2010	Joe Lewis Georgetown, KY 40324	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Vice President	\$30.00	\$120.00	
1/22/2010	Joe Lewis Georgetown, KY 40324	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Vice President	\$30.00	\$120.00	
3/5/2010	Joe Lewis Georgetown, KY 40324	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Vice President	\$30.00	\$120.00	
2/5/2010	John Lucey Cranberry Township, PA 16066	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Wbg Natl Director-industrial	\$30.00	\$120.00	
SUBTOTAL						

*Contributor Codes
IND - Individual
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OTH - Other
PTY - Political Party
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Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>01/01/2010</u>		CALIFORNIA FORM 460
through <u>03/17/2010</u>		
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NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/22/2010	John Lucey Cranberry Township, PA 16066	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Wbg Natl Director-industrial	\$30.00	\$120.00	
1/8/2010	John Lucey Cranberry Township, PA 16066	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Wbg Natl Director-industrial	\$30.00	\$120.00	
3/5/2010	John Lucey Cranberry Township, PA 16066	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Wbg Natl Director-industrial	\$30.00	\$120.00	
3/5/2010	John Tarantino Glendale, NY 11385	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Architecture Sr. Proj. Mgr	\$30.00	\$120.00	
1/8/2010	John Tarantino Glendale, NY 11385	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Architecture Sr. Proj. Mgr	\$30.00	\$120.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>01/01/2010</u> through <u>03/17/2010</u>		CALIFORNIA FORM 460
Page <u>94</u> of <u>182</u>		
NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

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DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/5/2010	John Tarantino Glendale, NY 11385	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Architecture Sr. Proj. Mgr	\$30.00	\$120.00	
1/22/2010	John Tarantino Glendale, NY 11385	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Architecture Sr. Proj. Mgr	\$30.00	\$120.00	
1/22/2010	John Yadlosky McMurray, PA 15317	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Eastern Bridge Coordinator	\$30.00	\$120.00	
3/5/2010	John Yadlosky McMurray, PA 15317	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Eastern Bridge Coordinator	\$30.00	\$120.00	
2/5/2010	John Yadlosky McMurray, PA 15317	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Eastern Bridge Coordinator	\$30.00	\$120.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>01/01/2010</u>		CALIFORNIA FORM 460
through <u>03/17/2010</u>		
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NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/8/2010	John Yadlosky Mcmurray, PA 15317	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Eastern Bridge Coordinator	\$30.00	\$120.00	
1/8/2010	Joseph Murdoch Ridgefield, CT 06877	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Natl Waste Fac Pursuit Leader	\$30.00	\$120.00	
2/5/2010	Joseph Murdoch Ridgefield, CT 06877	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Natl Waste Fac Pursuit Leader	\$30.00	\$120.00	
3/5/2010	Joseph Murdoch Ridgefield, CT 06877	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Natl Waste Fac Pursuit Leader	\$30.00	\$120.00	
1/22/2010	Joseph Murdoch Ridgefield, CT 06877	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Natl Waste Fac Pursuit Leader	\$30.00	\$120.00	
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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	01/01/2010	
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
HDR, Inc. PAC

I.D. Number
860346

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
3/5/2010	Kelly Kaatz Johnson City, TX 78636	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Department Manager	\$30.00	\$120.00	
1/22/2010	Kelly Kaatz Johnson City, TX 78636	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Department Manager	\$30.00	\$120.00	
1/8/2010	Kelly Kaatz Johnson City, TX 78636	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Department Manager	\$30.00	\$120.00	
2/5/2010	Kelly Kaatz Johnson City, TX 78636	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Department Manager	\$30.00	\$120.00	
1/8/2010	Lisa Reece Riverside, CA 92506	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Market Manager	\$30.00	\$120.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
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1/22/2010	Lisa Reece Riverside, CA 92506	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Market Manager	\$30.00	\$120.00	
2/5/2010	Lisa Reece Riverside, CA 92506	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Market Manager	\$30.00	\$120.00	
3/5/2010	Lisa Reece Riverside, CA 92506	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Market Manager	\$30.00	\$120.00	
2/5/2010	Michael Harvey Ann Arbor, MI 48103	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Senior Project Manager	\$30.00	\$120.00	
3/5/2010	Michael Harvey Ann Arbor, MI 48103	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Senior Project Manager	\$30.00	\$120.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>01/01/2010</u>		CALIFORNIA FORM 460
through <u>03/17/2010</u>		
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NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

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DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/22/2010	Michael Harvey Ann Arbor, MI 48103	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Senior Project Manager	\$30.00	\$120.00	
1/8/2010	Michael Harvey Ann Arbor, MI 48103	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Senior Project Manager	\$30.00	\$120.00	
2/5/2010	Paul Bowdoin Tampa, FL 33609	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Area Manager-gulf Coast	\$30.00	\$120.00	
1/22/2010	Paul Bowdoin Tampa, FL 33609	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Area Manager-gulf Coast	\$30.00	\$120.00	
3/5/2010	Paul Bowdoin Tampa, FL 33609	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Area Manager-gulf Coast	\$30.00	\$120.00	
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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>01/01/2010</u>		CALIFORNIA FORM 460
through <u>03/17/2010</u>		
		Page <u>99</u> of <u>182</u>
NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

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DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/8/2010	Paul Bowdoin Tampa, FL 33609	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Area Manager-gulf Coast	\$30.00	\$120.00	
2/5/2010	Richard Miller Charlotte, NC 28210	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Natl Client Dir, Hydropower	\$30.00	\$120.00	
3/5/2010	Richard Miller Charlotte, NC 28210	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Natl Client Dir, Hydropower	\$30.00	\$120.00	
1/8/2010	Richard Miller Charlotte, NC 28210	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Natl Client Dir, Hydropower	\$30.00	\$120.00	
1/22/2010	Richard Miller Charlotte, NC 28210	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Natl Client Dir, Hydropower	\$30.00	\$120.00	
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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
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I.D. Number
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3/5/2010	Robert McCormick Sacramento, CA 95818	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Managing Principal Vp	\$30.00	\$120.00	
1/22/2010	Robert McCormick Sacramento, CA 95818	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Managing Principal Vp	\$30.00	\$120.00	
2/5/2010	Robert McCormick Sacramento, CA 95818	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Managing Principal Vp	\$30.00	\$120.00	
1/8/2010	Robert McCormick Sacramento, CA 95818	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Managing Principal Vp	\$30.00	\$120.00	
1/8/2010	Steven Riojas Walnut Creek, CA 94596	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Managing Principal S&t Studio	\$30.00	\$120.00	

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SCHEDULE A (CONT.)

Statement covers period from <u>01/01/2010</u>		CALIFORNIA FORM 460
through <u>03/17/2010</u>		
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		I.D. Number 860346

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3/5/2010	Steven Riojas Walnut Creek, CA 94596	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Managing Principal S&t Studio	\$30.00	\$120.00	
2/5/2010	Steven Riojas Walnut Creek, CA 94596	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Managing Principal S&t Studio	\$30.00	\$120.00	
1/22/2010	Steven Riojas Walnut Creek, CA 94596	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Managing Principal S&t Studio	\$30.00	\$120.00	
1/22/2010	Susan Gilbert Arvada, CO 80007	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Central Reg W Bus Group Dir	\$30.00	\$120.00	
1/8/2010	Susan Gilbert Arvada, CO 80007	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Central Reg W Bus Group Dir	\$30.00	\$120.00	
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SCHEDULE A (CONT.)

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from	01/01/2010	
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3/5/2010	Susan Gilbert Arvada, CO 80007	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Central Reg W Bus Group Dir	\$30.00	\$120.00	
2/5/2010	Susan Gilbert Arvada, CO 80007	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Central Reg W Bus Group Dir	\$30.00	\$120.00	
1/22/2010	Thomas Donnelly Amity Harbor, NY 11701	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Construction Svcs	\$30.00	\$120.00	
2/5/2010	Thomas Donnelly Amity Harbor, NY 11701	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Construction Svcs	\$30.00	\$120.00	
3/5/2010	Thomas Donnelly Amity Harbor, NY 11701	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Construction Svcs	\$30.00	\$120.00	
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SCHEDULE A (CONT.)

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1/8/2010	Thomas Donnelly Amity Harbor, NY 11701	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Construction Svcs	\$30.00	\$120.00	
2/5/2010	Timothy Crockett Omaha, NE 68116	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Area Manager	\$30.00	\$120.00	
3/5/2010	Timothy Crockett Omaha, NE 68116	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Area Manager	\$30.00	\$120.00	
1/8/2010	Timothy Crockett Omaha, NE 68116	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Area Manager	\$30.00	\$120.00	
1/22/2010	Timothy Crockett Omaha, NE 68116	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Area Manager	\$30.00	\$120.00	
SUBTOTAL						

*Contributor Codes
IND - Individual
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(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	01/01/2010	
through	03/17/2010	Page 104 of 182
NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/5/2010	W Johnson Washougal, WA 98671	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Nw Area Transportation Dir.	\$30.00	\$120.00	
3/5/2010	W Johnson Washougal, WA 98671	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Nw Area Transportation Dir.	\$30.00	\$120.00	
1/22/2010	W Johnson Washougal, WA 98671	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Nw Area Transportation Dir.	\$30.00	\$120.00	
1/8/2010	W Johnson Washougal, WA 98671	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Nw Area Transportation Dir.	\$30.00	\$120.00	
1/22/2010	William Bennett Mission Viejo, CA 92691	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc So Cal Area Manager	\$30.00	\$120.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	01/01/2010	
through	03/17/2010	Page 105 of 182
NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/8/2010	William Bennett Mission Viejo, CA 92691	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc So Cal Area Manager	\$30.00	\$120.00	
3/5/2010	William Bennett Mission Viejo, CA 92691	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc So Cal Area Manager	\$30.00	\$120.00	
2/5/2010	William Bennett Mission Viejo, CA 92691	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc So Cal Area Manager	\$30.00	\$120.00	
2/5/2010	William Burel Portland, OR 97214	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Mgr-sr Proj	\$30.00	\$120.00	
1/22/2010	William Burel Portland, OR 97214	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Mgr-sr Proj	\$30.00	\$120.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>01/01/2010</u>		CALIFORNIA FORM 460
through <u>03/17/2010</u>		
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NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/8/2010	William Burgel Portland, OR 97214	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Mgr-sr Proj	\$30.00	\$120.00	
3/5/2010	William Burgel Portland, OR 97214	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Mgr-sr Proj	\$30.00	\$120.00	
1/8/2010	Wayne Short Redmond, WA 98052	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Rail Section Manager	\$35.00	\$140.00	
1/22/2010	Wayne Short Redmond, WA 98052	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Rail Section Manager	\$35.00	\$140.00	
3/5/2010	Wayne Short Redmond, WA 98052	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Rail Section Manager	\$35.00	\$140.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>01/01/2010</u>		CALIFORNIA FORM 460
through <u>03/17/2010</u>		
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NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

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DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/5/2010	Wayne Short Redmond, WA 98052	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Rail Section Manager	\$35.00	\$140.00	
3/5/2010	William Brinker Sioux Falls, SD 57108	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Department Manager	\$35.00	\$140.00	
1/22/2010	William Brinker Sioux Falls, SD 57108	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Department Manager	\$35.00	\$140.00	
2/5/2010	William Brinker Sioux Falls, SD 57108	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Department Manager	\$35.00	\$140.00	
1/8/2010	William Brinker Sioux Falls, SD 57108	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Department Manager	\$35.00	\$140.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	01/01/2010	
through	03/17/2010	Page 108 of 182
NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/22/2010	Alfredo Arce Helotes, TX 78023	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Marketing Manager	\$40.00	\$140.00	
3/5/2010	Alfredo Arce Helotes, TX 78023	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Marketing Manager	\$40.00	\$140.00	
2/5/2010	Alfredo Arce Helotes, TX 78023	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Marketing Manager	\$40.00	\$140.00	
1/8/2010	Bernard Gehrki Omaha, NE 68144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Managing Principal	\$40.00	\$160.00	
2/5/2010	Bernard Gehrki Omaha, NE 68144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Managing Principal	\$40.00	\$160.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>01/01/2010</u>		CALIFORNIA FORM 460
through <u>03/17/2010</u>		
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
HDR, Inc. PAC

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
3/5/2010	Bernard Gehrki Omaha, NE 68144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Managing Principal	\$40.00	\$160.00	
1/22/2010	Bernard Gehrki Omaha, NE 68144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Managing Principal	\$40.00	\$160.00	
3/5/2010	Charles O'reilly Woburn, MA 01801	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc East Region Transportation Dir	\$40.00	\$160.00	
1/22/2010	Charles O'reilly Woburn, MA 01801	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc East Region Transportation Dir	\$40.00	\$160.00	
1/8/2010	Charles O'reilly Woburn, MA 01801	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc East Region Transportation Dir	\$40.00	\$160.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	01/01/2010	
through	03/17/2010	Page 110 of 182
NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/5/2010	Charles O'reilly Woburn, MA 01801	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc East Region Transportation Dir	\$40.00	\$160.00	
1/22/2010	Charles Scroggin Lexington, KY 40502	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc President	\$40.00	\$160.00	
1/8/2010	Charles Scroggin Lexington, KY 40502	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc President	\$40.00	\$160.00	
2/5/2010	Charles Scroggin Lexington, KY 40502	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc President	\$40.00	\$160.00	
3/5/2010	Charles Scroggin Lexington, KY 40502	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc President	\$40.00	\$160.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>01/01/2010</u>		CALIFORNIA FORM 460
through <u>03/17/2010</u>		
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NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

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DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/8/2010	Charles Surprenant Rockville, MD 20850	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Director Of Development	\$40.00	\$160.00	
3/5/2010	Charles Surprenant Rockville, MD 20850	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Director Of Development	\$40.00	\$160.00	
2/5/2010	Charles Surprenant Rockville, MD 20850	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Director Of Development	\$40.00	\$160.00	
1/22/2010	Charles Surprenant Rockville, MD 20850	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Director Of Development	\$40.00	\$160.00	
3/5/2010	Dempsey Vass Vinton, VA 24179	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Regional Controller-east	\$40.00	\$100.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>01/01/2010</u> through <u>03/17/2010</u>		CALIFORNIA FORM 460
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NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

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DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
3/5/2010	Dennis Schulze Fort Worth, TX 76108	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Marketing Manager	\$40.00	\$160.00	
2/5/2010	Dennis Schulze Fort Worth, TX 76108	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Marketing Manager	\$40.00	\$160.00	
1/8/2010	Dennis Schulze Fort Worth, TX 76108	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Marketing Manager	\$40.00	\$160.00	
1/22/2010	Dennis Schulze Fort Worth, TX 76108	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Marketing Manager	\$40.00	\$160.00	
3/5/2010	Edward Reese Pittsburgh, PA 15216	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Marketing Mgr-pa/oh/wv Transp	\$40.00	\$160.00	
SUBTOTAL						

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SCHEDULE A (CONT.)

Statement covers period from <u>01/01/2010</u>		CALIFORNIA FORM 460
through <u>03/17/2010</u>		
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1/8/2010	Edward Reese Pittsburgh, PA 15216	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Marketing Mgr-pa/oh/wv Transp	\$40.00	\$160.00	
2/5/2010	Edward Reese Pittsburgh, PA 15216	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Marketing Mgr-pa/oh/wv Transp	\$40.00	\$160.00	
1/22/2010	Edward Reese Pittsburgh, PA 15216	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Marketing Mgr-pa/oh/wv Transp	\$40.00	\$160.00	
1/22/2010	James Carnahan Avonmore, PA 15618	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Senior Project Manager	\$40.00	\$160.00	
1/8/2010	James Carnahan Avonmore, PA 15618	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Senior Project Manager	\$40.00	\$160.00	
SUBTOTAL						

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SCHEDULE A (CONT.)

Statement covers period from <u>01/01/2010</u> through <u>03/17/2010</u>		CALIFORNIA FORM 460
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NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

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3/5/2010	James Carnahan Avonmore, PA 15618	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Senior Project Manager	\$40.00	\$160.00	
2/5/2010	James Carnahan Avonmore, PA 15618	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Senior Project Manager	\$40.00	\$160.00	
3/5/2010	James Haney Spicewood, TX 78669	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Department Manager	\$40.00	\$160.00	
2/5/2010	James Haney Spicewood, TX 78669	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Department Manager	\$40.00	\$160.00	
1/8/2010	James Haney Spicewood, TX 78669	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Department Manager	\$40.00	\$160.00	
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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	01/01/2010	
through	03/17/2010	Page 115 of 182
NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/22/2010	James Haney Spicewood, TX 78669	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Department Manager	\$40.00	\$160.00	
1/22/2010	James Moore Tampa, FL 33606	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Natl Comm Planning & Ud Dir	\$40.00	\$160.00	
2/5/2010	James Moore Tampa, FL 33606	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Natl Comm Planning & Ud Dir	\$40.00	\$160.00	
3/5/2010	James Moore Tampa, FL 33606	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Natl Comm Planning & Ud Dir	\$40.00	\$160.00	
1/8/2010	James Moore Tampa, FL 33606	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Natl Comm Planning & Ud Dir	\$40.00	\$160.00	
SUBTOTAL						

*Contributor Codes
IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other
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SCC - Small Contributor Committee

Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	01/01/2010	
through	03/17/2010	Page 116 of 182
NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/8/2010	Jay Campbell Washington, DC 20015	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Area Manager-northeast	\$40.00	\$160.00	
3/5/2010	Jay Campbell Washington, DC 20015	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Area Manager-northeast	\$40.00	\$160.00	
2/5/2010	Jay Campbell Washington, DC 20015	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Area Manager-northeast	\$40.00	\$160.00	
1/22/2010	Jay Campbell Washington, DC 20015	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Area Manager-northeast	\$40.00	\$160.00	
1/8/2010	John Williams White Plains, NY 10605	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Svp/nat Dir Sustain Dev-e&rm	\$40.00	\$160.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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Amounts may be rounded
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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	01/01/2010	
through	03/17/2010	Page 117 of 182

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
HDR, Inc. PAC

I.D. Number
860346

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/22/2010	John Williams White Plains, NY 10605	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Svp/nat Dir Sustain Dev-e&rm	\$40.00	\$160.00	
2/5/2010	John Williams White Plains, NY 10605	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Svp/nat Dir Sustain Dev-e&rm	\$40.00	\$160.00	
3/5/2010	John Williams White Plains, NY 10605	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Svp/nat Dir Sustain Dev-e&rm	\$40.00	\$160.00	
2/5/2010	Kenneth Wright Wexford, PA 15090	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Trans Business Group Mgr	\$40.00	\$160.00	
1/8/2010	Kenneth Wright Wexford, PA 15090	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Trans Business Group Mgr	\$40.00	\$160.00	

SUBTOTAL

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>01/01/2010</u>		CALIFORNIA FORM 460
through <u>03/17/2010</u>		
		Page <u>118</u> of <u>182</u>
		I.D. Number 860346

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

HDR, Inc. PAC

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
3/5/2010	Kenneth Wright Wexford, PA 15090	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Trans Business Group Mgr	\$40.00	\$160.00	
1/22/2010	Kenneth Wright Wexford, PA 15090	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Trans Business Group Mgr	\$40.00	\$160.00	
1/8/2010	Matthew Harvey Crescent, IA 51526	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Natl Director Federal Programs	\$40.00	\$160.00	
2/5/2010	Matthew Harvey Crescent, IA 51526	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Natl Director Federal Programs	\$40.00	\$160.00	
1/22/2010	Matthew Harvey Crescent, IA 51526	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Natl Director Federal Programs	\$40.00	\$160.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	01/01/2010	
through	03/17/2010	Page 119 of 182
NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
3/5/2010	Matthew Harvey Crescent, IA 51526	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Natl Director Federal Programs	\$40.00	\$160.00	
1/22/2010	Michael Moran Plano, TX 75025	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Director Of Operations East	\$40.00	\$160.00	
3/5/2010	Michael Moran Plano, TX 75025	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Director Of Operations East	\$40.00	\$160.00	
2/5/2010	Michael Moran Plano, TX 75025	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Director Of Operations East	\$40.00	\$160.00	
1/8/2010	Michael Moran Plano, TX 75025	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Director Of Operations East	\$40.00	\$160.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>01/01/2010</u>		CALIFORNIA FORM 460
through <u>03/17/2010</u>		
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NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/8/2010	Ralph Gilbert Oakmont, PA 15139	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Mgr Dept	\$40.00	\$160.00	
2/5/2010	Ralph Gilbert Oakmont, PA 15139	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Mgr Dept	\$40.00	\$160.00	
3/5/2010	Ralph Gilbert Oakmont, PA 15139	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Mgr Dept	\$40.00	\$160.00	
1/22/2010	Ralph Gilbert Oakmont, PA 15139	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Mgr Dept	\$40.00	\$160.00	
2/5/2010	Richard Vensas Corpus Christi, TX 78418	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Central Regional Director/evp	\$40.00	\$160.00	

SUBTOTAL

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	01/01/2010	
through	03/17/2010	Page 121 of 182
NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
3/5/2010	Richard Vensas Corpus Christi, TX 78418	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Central Regional Director/evp	\$40.00	\$160.00	
1/22/2010	Richard Vensas Corpus Christi, TX 78418	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Central Regional Director/evp	\$40.00	\$160.00	
1/8/2010	Richard Vensas Corpus Christi, TX 78418	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Central Regional Director/evp	\$40.00	\$160.00	
1/22/2010	Ronald Hughbanks Omaha, NE 68114	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Nat'l Director Of Contract Neg	\$40.00	\$160.00	
1/8/2010	Ronald Hughbanks Omaha, NE 68114	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Nat'l Director Of Contract Neg	\$40.00	\$160.00	

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>01/01/2010</u>		CALIFORNIA FORM 460
through <u>03/17/2010</u>		
		Page <u>122</u> of <u>182</u>
NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/5/2010	Ronald Hughbanks Omaha, NE 68114	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Nat'l Director Of Contract Neg	\$40.00	\$160.00	
3/5/2010	Ronald Hughbanks Omaha, NE 68114	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Nat'l Director Of Contract Neg	\$40.00	\$160.00	
1/8/2010	Russell Zapalac Kyle, TX 78640	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Central Transportation Bg Dir	\$40.00	\$160.00	
2/5/2010	Russell Zapalac Kyle, TX 78640	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Central Transportation Bg Dir	\$40.00	\$160.00	
1/22/2010	Russell Zapalac Kyle, TX 78640	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Central Transportation Bg Dir	\$40.00	\$160.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	01/01/2010	
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
HDR, Inc. PAC

I.D. Number
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DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
3/5/2010	Russell Zapalac Kyle, TX 78640	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Central Transportation Bg Dir	\$40.00	\$160.00	
1/8/2010	Subrata Bandyopadhyay Tampa, FL 33647	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Area Bg Dir-southeast E&rm	\$40.00	\$160.00	
3/5/2010	Subrata Bandyopadhyay Tampa, FL 33647	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Area Bg Dir-southeast E&rm	\$40.00	\$160.00	
2/5/2010	Subrata Bandyopadhyay Tampa, FL 33647	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Area Bg Dir-southeast E&rm	\$40.00	\$160.00	
1/22/2010	Subrata Bandyopadhyay Tampa, FL 33647	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Area Bg Dir-southeast E&rm	\$40.00	\$160.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	01/01/2010	
through	03/17/2010	Page 124 of 182
NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

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DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/8/2010	Terence Cox Waterloo, NE 68069	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Chief Financial Officer	\$40.00	\$160.00	
2/5/2010	Terence Cox Waterloo, NE 68069	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Chief Financial Officer	\$40.00	\$160.00	
3/5/2010	Terence Cox Waterloo, NE 68069	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Chief Financial Officer	\$40.00	\$160.00	
1/22/2010	Terence Cox Waterloo, NE 68069	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Chief Financial Officer	\$40.00	\$160.00	
3/5/2010	William Dowd Austin, TX 78738	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Transp Bus Group Dir Cen Reg	\$40.00	\$160.00	

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>01/01/2010</u>		CALIFORNIA FORM 460
through <u>03/17/2010</u>		
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NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

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1/22/2010	William Dowd Austin, TX 78738	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Transp Bus Group Dir Cen Reg	\$40.00	\$160.00	
1/8/2010	William Dowd Austin, TX 78738	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Transp Bus Group Dir Cen Reg	\$40.00	\$160.00	
2/5/2010	William Dowd Austin, TX 78738	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Transp Bus Group Dir Cen Reg	\$40.00	\$160.00	
1/22/2010	William Raleigh Issaquah, WA 98029	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Western Regional Director/evp	\$40.00	\$160.00	
2/5/2010	William Raleigh Issaquah, WA 98029	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Western Regional Director/evp	\$40.00	\$160.00	
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SCHEDULE A (CONT.)

Statement covers period from <u>01/01/2010</u>		CALIFORNIA FORM 460
through <u>03/17/2010</u>		
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NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

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1/8/2010	William Raleigh Issaquah, WA 98029	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Western Regional Director/evp	\$40.00	\$160.00	
3/5/2010	William Raleigh Issaquah, WA 98029	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Western Regional Director/evp	\$40.00	\$160.00	
2/5/2010	Eric Keen Omaha, NE 68130	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Natl Director Transportation	\$45.00	\$180.00	
1/8/2010	Eric Keen Omaha, NE 68130	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Natl Director Transportation	\$45.00	\$180.00	
3/5/2010	Eric Keen Omaha, NE 68130	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Natl Director Transportation	\$45.00	\$180.00	
SUBTOTAL						

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OTH - Other
PTY - Political Party
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Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>01/01/2010</u>		CALIFORNIA FORM 460
through <u>03/17/2010</u>		
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NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/22/2010	Eric Keen Omaha, NE 68130	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Natl Director Transportation	\$45.00	\$180.00	
1/8/2010	Carmen Abad-fitts Garden Ridge, TX 78266	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Managing Principal	\$50.00	\$200.00	
2/5/2010	Carmen Abad-fitts Garden Ridge, TX 78266	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Managing Principal	\$50.00	\$200.00	
3/5/2010	Carmen Abad-fitts Garden Ridge, TX 78266	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Managing Principal	\$50.00	\$200.00	
1/22/2010	Carmen Abad-fitts Garden Ridge, TX 78266	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Managing Principal	\$50.00	\$200.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	01/01/2010	
through	03/17/2010	Page 128 of 182
NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/5/2010	Charles Hales Vancouver, WA 98666	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Transit Planning Principal	\$50.00	\$200.00	
3/5/2010	Charles Hales Vancouver, WA 98666	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Transit Planning Principal	\$50.00	\$200.00	
1/8/2010	Charles Hales Vancouver, WA 98666	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Transit Planning Principal	\$50.00	\$200.00	
1/22/2010	Charles Hales Vancouver, WA 98666	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Transit Planning Principal	\$50.00	\$200.00	
1/8/2010	Dennis Hirschbrunner Columbus, NE 68602	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Dir-marketing	\$50.00	\$200.00	

SUBTOTAL

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>01/01/2010</u>		CALIFORNIA FORM 460
through <u>03/17/2010</u>		
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		I.D. Number 860346

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NAME OF FILER
HDR, Inc. PAC

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
3/5/2010	Dennis Hirschbrunner Columbus, NE 68602	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Dir-marketing	\$50.00	\$200.00	
2/5/2010	Dennis Hirschbrunner Columbus, NE 68602	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Dir-marketing	\$50.00	\$200.00	
1/22/2010	Dennis Hirschbrunner Columbus, NE 68602	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Dir-marketing	\$50.00	\$200.00	
2/5/2010	Dorothy Raposa Newton, MA 02459	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Regional Marketing Dir-east	\$50.00	\$200.00	
3/5/2010	Dorothy Raposa Newton, MA 02459	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Regional Marketing Dir-east	\$50.00	\$200.00	
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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	01/01/2010	
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
HDR, Inc. PAC

I.D. Number
860346

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1/8/2010	Dorothy Raposa Newton, MA 02459	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Regional Marketing Dir-east	\$50.00	\$200.00	
1/22/2010	Dorothy Raposa Newton, MA 02459	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Regional Marketing Dir-east	\$50.00	\$200.00	
2/5/2010	Edward Tenny Portland, OR 97206	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc National Marketing Manager	\$50.00	\$200.00	
1/22/2010	Edward Tenny Portland, OR 97206	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc National Marketing Manager	\$50.00	\$200.00	
1/8/2010	Edward Tenny Portland, OR 97206	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc National Marketing Manager	\$50.00	\$200.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	01/01/2010	
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NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

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DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
3/5/2010	Edward Tenny Portland, OR 97206	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc National Marketing Manager	\$50.00	\$200.00	
3/5/2010	Henry Benjes Austin, TX 78755	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Technical Director	\$50.00	\$200.00	
2/5/2010	Henry Benjes Austin, TX 78755	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Technical Director	\$50.00	\$200.00	
1/22/2010	Henry Benjes Austin, TX 78755	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Technical Director	\$50.00	\$200.00	
1/8/2010	Henry Benjes Austin, TX 78755	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Technical Director	\$50.00	\$200.00	
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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>01/01/2010</u> through <u>03/17/2010</u>		CALIFORNIA FORM 460
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NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

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DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/22/2010	Lolene Terry Henderson, NV 89052	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Department Manager	\$50.00	\$200.00	
1/8/2010	Lolene Terry Henderson, NV 89052	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Department Manager	\$50.00	\$200.00	
2/5/2010	Lolene Terry Henderson, NV 89052	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Department Manager	\$50.00	\$200.00	
3/5/2010	Lolene Terry Henderson, NV 89052	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Department Manager	\$50.00	\$200.00	
3/5/2010	Richard Bell Omaha, NE 68114	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Chairman C E O And President	\$50.00	\$200.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>01/01/2010</u> through <u>03/17/2010</u>		CALIFORNIA FORM 460 Page <u>133</u> of <u>182</u> I.D. Number 860346

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
HDR, Inc. PAC

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/22/2010	Richard Bell Omaha, NE 68114	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Chairman C E O And President	\$50.00	\$200.00	
1/8/2010	Richard Bell Omaha, NE 68114	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Chairman C E O And President	\$50.00	\$200.00	
2/5/2010	Richard Bell Omaha, NE 68114	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Chairman C E O And President	\$50.00	\$200.00	
3/5/2010	Samuel Cobb Huntington Beach, CA 92649	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc National Dir Of Civic Affairs	\$50.00	\$200.00	
2/5/2010	Samuel Cobb Huntington Beach, CA 92649	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc National Dir Of Civic Affairs	\$50.00	\$200.00	
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	01/01/2010	
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NAME OF FILER
HDR, Inc. PAC

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1/22/2010	Samuel Cobb Huntington Beach, CA 92649	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc National Dir Of Civic Affairs	\$50.00	\$200.00	
1/8/2010	Samuel Cobb Huntington Beach, CA 92649	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc National Dir Of Civic Affairs	\$50.00	\$200.00	
1/8/2010	Thomas Sanders Omaha, NE 68114	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Dir Of Professional Services	\$50.00	\$200.00	
2/5/2010	Thomas Sanders Omaha, NE 68114	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Dir Of Professional Services	\$50.00	\$200.00	
3/5/2010	Thomas Sanders Omaha, NE 68114	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Dir Of Professional Services	\$50.00	\$200.00	
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SCHEDULE A (CONT.)

Statement covers period from <u>01/01/2010</u> through <u>03/17/2010</u>		CALIFORNIA FORM 460
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NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

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1/22/2010	Thomas Sanders Omaha, NE 68114	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Dir Of Professional Services	\$50.00	\$200.00	
3/5/2010	Timothy Connolly Omaha, NE 68130	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Director Of International	\$50.00	\$150.00	
2/5/2010	Timothy Connolly Omaha, NE 68130	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Director Of International	\$50.00	\$150.00	
1/22/2010	Timothy Connolly Omaha, NE 68130	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Director Of International	\$50.00	\$150.00	
2/5/2010	William Wadsworth Tampa, FL 33611	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Eastern Regional Director/evp	\$50.00	\$200.00	
SUBTOTAL						

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SCHEDULE A (CONT.)

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1/22/2010	William Wadsworth Tampa, FL 33611	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Eastern Regional Director/evp	\$50.00	\$200.00	
1/8/2010	William Wadsworth Tampa, FL 33611	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Eastern Regional Director/evp	\$50.00	\$200.00	
3/5/2010	William Wadsworth Tampa, FL 33611	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Eastern Regional Director/evp	\$50.00	\$200.00	
1/22/2010	Merle Bachman Omaha, NE 68114	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc President Of Architecture	\$58.00	\$232.00	
3/5/2010	Merle Bachman Omaha, NE 68114	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc President Of Architecture	\$58.00	\$232.00	
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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	01/01/2010	
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2/5/2010	Merle Bachman Omaha, NE 68114	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc President Of Architecture	\$58.00	\$232.00	
1/8/2010	Merle Bachman Omaha, NE 68114	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc President Of Architecture	\$58.00	\$232.00	
1/8/2010	Gary Bleeker Omaha, NE 68130	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Natl Director Water Programs	\$60.00	\$240.00	
3/5/2010	Gary Bleeker Omaha, NE 68130	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Natl Director Water Programs	\$60.00	\$240.00	
1/22/2010	Gary Bleeker Omaha, NE 68130	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Natl Director Water Programs	\$60.00	\$240.00	

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SCHEDULE A (CONT.)

Statement covers period from <u>01/01/2010</u>		CALIFORNIA FORM 460
through <u>03/17/2010</u>		
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NAME OF FILER
HDR, Inc. PAC

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/5/2010	Gary Bleeker Omaha, NE 68130	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Natl Director Water Programs	\$60.00	\$240.00	
1/22/2010	George Little Omaha, NE 68116	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc President	\$60.00	\$240.00	
3/5/2010	George Little Omaha, NE 68116	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc President	\$60.00	\$240.00	
2/5/2010	George Little Omaha, NE 68116	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc President	\$60.00	\$240.00	
1/8/2010	George Little Omaha, NE 68116	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc President	\$60.00	\$240.00	
SUBTOTAL						

*Contributor Codes
IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>01/01/2010</u> through <u>03/17/2010</u>		CALIFORNIA FORM 460
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NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/22/2010	Elwin Larson Omaha, NE 68154	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Natl Director Environmental &	\$65.00	\$260.00	
2/5/2010	Elwin Larson Omaha, NE 68154	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Natl Director Environmental &	\$65.00	\$260.00	
1/8/2010	Elwin Larson Omaha, NE 68154	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Natl Director Environmental &	\$65.00	\$260.00	
3/5/2010	Elwin Larson Omaha, NE 68154	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Natl Director Environmental &	\$65.00	\$260.00	
1/22/2010	Marcia Earle Ossining, NY 10562	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Area Marketing Manager	\$75.00	\$300.00	
SUBTOTAL						

*Contributor Codes
IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>01/01/2010</u> through <u>03/17/2010</u>		CALIFORNIA FORM 460
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NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/5/2010	Marcia Earle Ossining, NY 10562	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Area Marketing Manager	\$75.00	\$300.00	
3/5/2010	Marcia Earle Ossining, NY 10562	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Area Marketing Manager	\$75.00	\$300.00	
1/8/2010	Marcia Earle Ossining, NY 10562	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc Area Marketing Manager	\$75.00	\$300.00	
1/22/2010	Melford Placilla Placentia, CA 92870	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc National Bus Class Dir Alt Del	\$115.00	\$460.00	
1/8/2010	Melford Placilla Placentia, CA 92870	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc National Bus Class Dir Alt Del	\$115.00	\$460.00	
SUBTOTAL						

*Contributor Codes
IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>01/01/2010</u>		CALIFORNIA FORM 460
through <u>03/17/2010</u>		
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NAME OF FILER HDR, Inc. PAC		I.D. Number 860346

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/5/2010	Melford Placilla Placentia, CA 92870	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc National Bus Class Dir Alt Del	\$115.00	\$460.00	
3/5/2010	Melford Placilla Placentia, CA 92870	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hdr Inc National Bus Class Dir Alt Del	\$115.00	\$460.00	
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
SUBTOTAL				\$21,682.00		

*Contributor Codes
IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

Schedule B – Part 1 Loans Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE B - PART 1

Statement covers period
from 01/01/2010
through 03/17/2010

CALIFORNIA
FORM **460**

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
HDR, Inc. PAC

I.D. NUMBER
860346

FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD*	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				<input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN		 RATE % 		CALENDAR YEAR PER ELECTION**
					DATE DUE		DATE INCURRED	
<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				<input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN		 RATE % 		CALENDAR YEAR PER ELECTION**
					DATE DUE		DATE INCURRED	
<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				<input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN		 RATE % 		CALENDAR YEAR PER ELECTION**
					DATE DUE		DATE INCURRED	

SUBTOTALS

Schedule B Summary

1. Loans received this period. _____
(Total Column (b) plus unitemized loans less than \$100.)

2. Loans paid or forgiven this period _____
(Total Column (c) plus loans under \$100 paid or forgiven.)
(Include loans paid by a third party that are also itemized on Schedule A.)

3. Net change this period. (Subtract Line 2 from Line 1.) _____ **Net** _____
Enter the net here and on the Summary Page, Column A, Line 2. (may be a negative number)

(Enter (e) on
Schedule E, Line 3)

* Amounts forgiven or paid by
another party also must be
reported on Schedule A.

** If required.

*Contributor Codes

IND-Individual COM-Recipient Committee (other than PTY or SCC) OTH-Other PTY-Political Party SCC-Small Contributor Committee

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule B - Part 2

Loan Guarantors

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE B - PART 2

Statement covers period from 01/01/2010 through 03/17/2010	CALIFORNIA FORM 460
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I.D. Number 860346	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
HDR, Inc. PAC

FULL NAME, STREET ADDRESS AND ZIP CODE OF GUARANTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	LOAN	AMOUNT GUARANTEED THIS PERIOD	CUMULATIVE TO DATE	BALANCE OUTSTANDING TO DATE
	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		LENDER DATE		CALENDAR YEAR PER ELECTION (IF REQUIRED)	
	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		LENDER DATE		CALENDAR YEAR PER ELECTION (IF REQUIRED)	
	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		LENDER DATE		CALENDAR YEAR PER ELECTION (IF REQUIRED)	
	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		LENDER DATE		CALENDAR YEAR PER ELECTION (IF REQUIRED)	
SUBTOTAL					Enter on Summary Page, Line 17 only.	

Schedule C Nonmonetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE C

Statement covers period from <u>01/01/2010</u> through <u>03/17/2010</u>	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
HDR, Inc. PAC

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL

Schedule C Summary

- Amount received this period - nonmonetary contributions of \$100 or more.
(Include all Schedule C subtotals.).....
- Amount received this period - unitemized nonmonetary contributions of less than \$100
- Total nonmonetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) **TOTAL**

*Contributor Codes
IND - Individual
COM- Recipient Committee
(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

Schedule D

Summary of Expenditures

Supporting/Opposing Other

Candidates, Measures and Committees

Type or print in ink.
Amounts may be rounded
to whole dollars.

Statement covers period		SCHEDULE D	
from	01/01/2010	CALIFORNIA FORM 460	
through	03/17/2010	Page 145 of 182	
NAME OF FILER HDR, Inc. PAC		I.D. NUMBER 860346	

SEE INSTRUCTIONS ON REVERSE

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/10/2010	Antonio Munoz	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	ITEMIZE void	(\$300.00)	(\$300.00)	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
2/16/2010	Lee Terry U S	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Direct Contribution	\$1,500.00	\$1,500.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
2/25/2010	Kirk Watson	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Direct Contribution	\$250.00	\$250.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D Summary

- Contributions and independent expenditures made this period of \$100 or more. (Include all Schedule D subtotals.) \$69,424.00
- Unitemized contributions and independent expenditures made this period of under \$100 \$0.00
- Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) **TOTAL** \$69,424.00

**Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE D (CONT.)

Statement covers period

from 01/01/2010

through 03/17/2010

**CALIFORNIA
FORM 460**

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NAME OF FILER
HDR, Inc. PAC

I.D. NUMBER
860346

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
3/2/2010	Frank Avila	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Direct Contribution	\$500.00	\$500.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
3/4/2010	Annabeth Surbaugh	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Direct Contribution	\$500.00	\$500.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
3/4/2010	Randy Wright	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Direct Contribution	\$500.00	\$500.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
3/4/2010	Patrick Rooney	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Direct Contribution	\$500.00	\$500.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL						

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period

from 01/01/2010

through 03/17/2010

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NAME OF FILER
 HDR, Inc. PAC

I.D. NUMBER
 860346

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
3/4/2010	Adrian Smith U S	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Direct Contribution	\$1,000.00	\$1,000.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
3/4/2010	Mike Simpson U S	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Direct Contribution	\$1,000.00	\$1,000.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
3/4/2010	John McCain U S	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Direct Contribution	\$1,500.00	\$1,500.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
3/4/2010	Steve Cohn	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Direct Contribution	\$125.00	\$125.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL						

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
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to whole dollars.

SCHEDULE D (CONT.)

Statement covers period

from 01/01/2010

through 03/17/2010

CALIFORNIA
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NAME OF FILER
HDR, Inc. PAC

I.D. NUMBER
860346

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
3/4/2010	Mary Ann Borgeson	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Direct Contribution	\$250.00	\$250.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
3/4/2010	Thomas Lynam	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Direct Contribution	\$250.00	\$250.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
3/4/2010	Tourism Helps Tempe	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Direct Contribution	\$2,500.00	\$2,500.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
3/9/2010	Pat Bates County Counsel Jurisdiction: Description:	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Direct Contribution	\$250.00	\$250.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL						

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE D (CONT.)

Statement covers period

from 01/01/2010

through 03/17/2010

CALIFORNIA
FORM 460

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NAME OF FILER
HDR, Inc. PAC

I.D. NUMBER
860346

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
3/11/2010	Jeff Barton	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Direct Contribution	\$500.00	\$500.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
3/11/2010	Dan Keller	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Direct Contribution	\$250.00	\$500.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
3/11/2010	David Pepper	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Direct Contribution	\$250.00	\$250.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
3/11/2010	Carolyn Cavecche	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Direct Contribution	\$250.00	\$250.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL						

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE D (CONT.)

Statement covers period

from 01/01/2010

through 03/17/2010

CALIFORNIA
FORM 460

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NAME OF FILER
HDR, Inc. PAC

I.D. NUMBER
860346

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
3/11/2010	John Salazar U S	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Direct Contribution	\$1,000.00	\$1,000.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
3/11/2010	HCEC-PAC	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Direct Contribution	\$1,500.00	\$1,500.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
3/11/2010	Jerry Eversole	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Direct Contribution	\$5,000.00	\$5,000.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
3/11/2010	Alan B. Sadler	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Direct Contribution	\$2,500.00	\$2,500.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL						

**Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE D (CONT.)

Statement covers period

from 01/01/2010

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NAME OF FILER
HDR, Inc. PAC

I.D. NUMBER
860346

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
3/15/2010	Jim Zay	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Direct Contribution	\$150.00	\$150.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
3/15/2010	David Price U S	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Direct Contribution	\$1,000.00	\$1,000.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
1/4/2010	Francis G. Slay Mayor Jurisdiction: Description:City	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Direct Contribution	\$1,500.00	\$1,500.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
1/6/2010	Joe McKeown	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Direct Contribution	\$500.00	\$500.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE D (CONT.)

Statement covers period

from 01/01/2010

through 03/17/2010

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NAME OF FILER
HDR, Inc. PAC

I.D. NUMBER
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DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/14/2010	Tom Balya	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	ITEMIZE Stop Payment	(\$100.00)	(\$200.00)	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
1/14/2010	Tom Balya	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	ITEMIZE Stop Payment	(\$200.00)	(\$200.00)	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
2/19/2010	Bob Menendez U S	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Direct Contribution	\$2,500.00	\$2,500.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
2/19/2010	Jimmie Yee	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Direct Contribution	\$249.00	\$249.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL						

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE D (CONT.)

Statement covers period

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2/19/2010	Lake Ray, III	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Direct Contribution	\$500.00	\$500.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
2/19/2010	Shantel Krebs	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Direct Contribution	\$250.00	\$250.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
2/19/2010	Patrick Kennedy	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Direct Contribution	\$500.00	\$500.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
2/19/2010	Jim Oberstar U S	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Direct Contribution	\$1,000.00	\$1,000.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL						

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE D (CONT.)

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DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/19/2010	Dave Obey U S	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Direct Contribution	\$1,000.00	\$2,000.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
2/19/2010	Steny Hoyer U S	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Direct Contribution	\$1,500.00	\$2,500.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
2/19/2010	Steny Hoyer U S	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Direct Contribution	\$1,000.00	\$2,500.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
2/19/2010	John Mica U S	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Direct Contribution	\$2,500.00	\$7,500.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL						

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
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SCHEDULE D (CONT.)

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2/19/2010	John Mica U S	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Direct Contribution	\$5,000.00	\$7,500.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
2/19/2010	Jeff Kottkamp	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Direct Contribution	\$500.00	\$500.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
2/19/2010	Shawn Harrison	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Direct Contribution	\$500.00	\$500.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
2/19/2010	Richard Glorioso	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Direct Contribution	\$500.00	\$500.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL						

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
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SCHEDULE D (CONT.)

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DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/19/2010	Tom Balya	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	ITEMIZE Direct Contribution	\$100.00	(\$200.00)	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
2/19/2010	Josh Shapiro	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Direct Contribution	\$500.00	\$500.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
2/19/2010	Dan Keller	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Direct Contribution	\$250.00	\$500.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
2/19/2010	Dan Deasy	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Direct Contribution	\$250.00	\$250.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL						

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
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2/2/2010	Troy Henry	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Direct Contribution	\$1,000.00	\$1,000.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
2/2/2010	Mitch Landrieu	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Direct Contribution	\$1,000.00	\$1,000.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
2/3/2010	William Lacy Clay, Jr. U S	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Direct Contribution	\$1,000.00	\$1,000.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
2/3/2010	Annise Parker	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Direct Contribution	\$5,000.00	\$5,000.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL						

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
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SCHEDULE D (CONT.)

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2/3/2010	Bob Krist	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Direct Contribution	\$500.00	\$500.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
2/3/2010	Dan Onorato	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Direct Contribution	\$1,000.00	\$1,000.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
2/3/2010	Franklin County Democratic Committee	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Direct Contribution	\$1,000.00	\$1,000.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
2/3/2010	Patrick Cooper	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Direct Contribution	\$1,000.00	\$1,000.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL						

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
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SCHEDULE D (CONT.)

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2/3/2010	Bob McDonnell	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Direct Contribution	\$2,500.00	\$2,500.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
2/3/2010	Richard Burr U S	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Direct Contribution	\$1,000.00	\$1,000.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
2/3/2010	Dave Obey U S	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Direct Contribution	\$1,000.00	\$2,000.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
2/3/2010	Jerry Hoagland	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Direct Contribution	\$1,000.00	\$1,000.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL						

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
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 to whole dollars.

SCHEDULE D (CONT.)

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2/3/2010	John Muns	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Direct Contribution	\$2,500.00	\$2,500.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
2/3/2010	Charles Trevino	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Direct Contribution	\$2,500.00	\$2,500.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
2/3/2010	Janice Hahn	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Direct Contribution	\$500.00	\$500.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
2/3/2010	Gloria Gray	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Direct Contribution	\$1,000.00	\$1,000.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL						

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

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SCHEDULE D (CONT.)

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2/3/2010	Todd Smith	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Direct Contribution	\$250.00	\$250.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
2/3/2010	Mabrie Jackson	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Direct Contribution	\$250.00	\$250.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
2/3/2010	Charlie Geren	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Direct Contribution	\$500.00	\$500.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
2/3/2010	Burt Solomons	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Direct Contribution	\$500.00	\$500.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL						

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
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SCHEDULE D (CONT.)

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2/3/2010	Florence Shapiro	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Direct Contribution	\$500.00	\$500.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
2/3/2010	Joe Straus	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Direct Contribution	\$1,000.00	\$1,000.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
2/3/2010	Tommy Williams	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Direct Contribution	\$500.00	\$500.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
1/25/2010	Bruce Starr	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	ITEMIZE Void	(\$100.00)	(\$600.00)	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL						

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE D (CONT.)

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2/5/2010	Bruce Starr	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	ITEMIZE Void	(\$500.00)	(\$600.00)	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
		<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose					
		<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose					
		<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL \$69,424.00

Schedule E Payments Made

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
HDR, Inc. PAC

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Citizen's for Antonio Tony Munoz Chicago, IL 60609 Committee ID: ILMUNOZSE	CTB		Explain:	(\$300.00)
Lee Terry for Congress Omaha, NE 68154 Committee ID: H8NE02139	CTB		Explain:	\$1,500.00
Kirk Watson for Texas Senate Austin, TX 78768 Committee ID: TXWATSOSE	CTB		Explain:	\$250.00

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL

Schedule E Summary

1. Payments made this period of \$100 or more. (Include all Schedule E subtotals.)	\$69,771.00
2. Unitemized payments made this period of under \$100.	\$55.00
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	\$0.00
4. Total payments made this period. (Add lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	TOTAL \$69,826.00

Schedule E (Continuation Sheet) Payments Made

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

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SEE INSTRUCTIONS ON REVERSE

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
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LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Internal Revenue Service Ogden, UT 84201	200			\$347.00
Friends for Avila Chicago, IL 60646	CTB	Explain:		\$500.00
Committee ID: ILAVILAWC Committee to Re-elect Annabeth Overland Park, KS 66213	CTB	Explain:		\$500.00
Committee ID: KSSURBACC Wright for Council Norfolk, VA 23502	CTB	Explain:		\$500.00
Committee ID: VAWRIGHCC Patrick Rooney, Jr. Campaign Tallahassee, FL 32308	CTB	Explain:		\$500.00
Committee ID: FLROONEHO				

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SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
HDR, Inc. PAC

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Adrian Smith for Congress Scottsbluff, NE 69361 Committee ID: H6NE03115	CTB	Explain:		\$1,000.00
Simpson for Congress Blackfoot, ID 83221 Committee ID: H8ID02064	CTB	Explain:		\$1,000.00
Friends of John McCain Glendale, AZ 85310 Committee ID: S6AZ00019	CTB	Explain:		\$1,500.00
Friends of Steve Cohn for City Council Sacramento, CA 95814 Committee ID: 1319668	CTB	Explain:		\$125.00
Mary Ann Borgeson for County Board Omaha, NE 68137 Committee ID: NEBORGECC	CTB	Explain:		\$250.00

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SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

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SCHEDULE E (CONT.)

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Committee to Re-Elect Thomas Lynam Papillion, NE 68046	CTB	Explain:		\$250.00
Committee ID: NELYNAMCS Tourism Helps Tempe Tempe, AZ 85281	CTB	Explain:		\$2,500.00
Committee ID: AZTOURTMP Bates for Supervisor 2010, #1265511 Laguna Niguel, CA 92677	CTB	Explain:		\$250.00
Committee ID: 1265511 Jeff Barton Campaign Buda, TX 78610	CTB	Explain:		\$500.00
Committee ID: TXBARTOJG Friends of Dan Keller Pittsburgh, PA 15212	CTB	Explain:		\$250.00
Committee ID: PAKELLEHO				

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Schedule E (Continuation Sheet) Payments Made

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Citizens for Pepper Cincinnati, OH 45202	CTB	Explain:		\$250.00
Committee ID: OHPEPPEAU Re-Elect Mayor Carolyn Cavecche 2010 Villa Park, CA 92867	CTB	Explain:		\$250.00
Committee ID: 1277040 John Salazar for Congress Washington, DC 20003	CTB	Explain:		\$1,000.00
Committee ID: H4CO03167 HCEC-PAC Houston, TX 77018	CTB	Explain:		\$1,500.00
Committee ID: TXHCECPAC Jerry Eversole Campaign Houston, TX 77046	CTB	Explain:		\$5,000.00
Committee ID: TXEVERSCC				

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SCHEDULE E (CONT.)

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Alan B. Sadler Campaign Conroe, TX 77304 Committee ID: TXSALDEJG	CTB	Explain:		\$2,500.00
Citizens to Elect Jim Zay Carol Stream, IL 60188 Committee ID: ILZAY00CB	CTB	Explain:		\$150.00
Price for Congress Raleigh, NC 27602 Committee ID: H6NC04037	CTB	Explain:		\$1,000.00
Slay for Mayor Saint Louis, MO 63156 Committee ID: MOSLAY0MA	CTB	Explain:		\$1,500.00
McKeown for Charleston County Council Mount Pleasant, SC 29464 Committee ID: SCMCKEOCC	CTB	Explain:		\$500.00

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SCHEDULE E (CONT.)

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Balya for Commissioner Committee Greensburg, PA 15601	CTB	Explain:		(\$100.00)
Committee ID: PABAYLACC				
Balya for Commissioner Committee Greensburg, PA 15601	CTB	Explain:		(\$200.00)
Committee ID: PABAYLACC				
Menendez for Senate Newark, NJ 07102	CTB	Explain:		\$2,500.00
Committee ID: S6NJ00289				
Friends of Jimmie Yee, #1282593 Sacramento, CA 95811	CTB	Explain:		\$249.00
Committee ID: 1282593				
Lake Ray Campaign Jacksonville, FL 32277	CTB	Explain:		\$500.00
Committee ID: FLRAY00HO				

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SCHEDULE E (CONT.)

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Shantel Krebs Election Committee Sioux Falls, SD 57101 Committee ID: SDKREBSHO	CTB	Explain:		\$250.00
Patrick Kennedy City Council Sacramento, CA 95811	CTB	Explain:		\$500.00
Friends of Jim Oberstar Washington, DC 20002 Committee ID: H6MN08047	CTB	Explain:		\$1,000.00
A Lot of People for Dave Obey Wausau, WI 54402 Committee ID: H6WI07033	CTB	Explain:		\$1,000.00
Hoyer for Congress Bowie, MD 20716 Committee ID: H2MD05155	CTB	Explain:		\$1,500.00

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SCHEDULE E (CONT.)

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Hoyer for Congress Bowie, MD 20716	CTB	Explain:		\$1,000.00
Committee ID: H2MD05155				
Mica for Congress Casselberry, FL 32718	CTB	Explain:		\$2,500.00
Committee ID: H2FL08055				
Mica for Congress Casselberry, FL 32718	CTB	Explain:		\$5,000.00
Committee ID: H2FL08055				
Jeff Kottkamp Campaign Tallahassee, FL 32311	CTB	Explain:		\$500.00
Committee ID: FLKOTTKAG				
Shawn Harrison Campaign Tampa, FL 33617	CTB	Explain:		\$500.00
Committee ID: FLHARRIHO				

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SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
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Glorioso for State House, District 62 Plant City, FL 33566	CTB	Explain:		\$500.00
Committee ID: FLGLORIHO Balya for Commissioner Committee Greensburg, PA 15601	CTB	Explain:		\$100.00
Committee ID: PABAYLACC Friends of Josh Shapiro Abington, PA 19001	CTB	Explain:		\$500.00
Committee ID: PASHAPIHO Friends of Dan Keller Pittsburgh, PA 15212	CTB	Explain:		\$250.00
Committee ID: PAKELLEHO Committee to Elect Dan Deasy Pittsburgh, PA 15205	CTB	Explain:		\$250.00
Committee ID: PADEASEHO				

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SCHEDULE E (CONT.)

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Troy Henry for Mayor New Orleans, LA 70119 Committee ID: NEHENRYMA	CTB	Explain:		\$1,000.00
Mitch Landrieu for Mayor New Orleans, LA 70130 Committee ID: LALANDRIM	CTB	Explain:		\$1,000.00
Clay Jr. for Congress Campaign Committee Saint Louis, MO 63108 Committee ID: H0MO01066	CTB	Explain:		\$1,000.00
Annise Parker Campaign Houston, TX 77007 Committee ID: TXPARKEMA	CTB	Explain:		\$5,000.00
Bob Krist, Senator Omaha, NE 68134 Committee ID: NEKRISTSE	CTB	Explain:		\$500.00

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SCHEDULE E (CONT.)

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Onorato for Governor Pittsburgh, PA 15222	CTB	Explain:		\$1,000.00
Committee ID: PAONORAGV Franklin County Democratic Committee Columbus, OH 43215	CTB	Explain:		\$1,000.00
Committee ID: OHFRCTYDM Cooper for Mayor Campaign Birmingham, AL 35209	CTB	Explain:		\$1,000.00
Committee ID: ALCOPEMA Bob McDonnell Inaugural Committee Richmond, VA 23294	CTB	Explain:		\$2,500.00
Committee ID: VAMCDONGV Richard Burr for Senate Peoria, AZ 85383	CTB	Explain:		\$1,000.00
Committee ID: S4NC00089				

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A Lot of People for Dave Obey Wausau, WI 54402	CTB	Explain:		\$1,000.00
Committee ID: H6WI07033 Jerry Hoagland Campaign Fund Murphy, TX 75094	CTB	Explain:		\$1,000.00
Committee ID: TXHOAGLCC John Muns for Collin County Jdg Campaign Plano, TX 75093	CTB	Explain:		\$2,500.00
Committee ID: TXMUNS0JG Friends of Charles Trevino (#1297409) South Pasadena, CA 91030	CTB	Explain:		\$2,500.00
Committee ID: 1297409 Janice Hahn Lt. Governor 2010 Exp Cmte Los Angeles, CA 90036	CTB	Explain:		\$500.00

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LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Gloria Gray for Assembly #1317738 Los Angeles, CA 90071	CTB	Explain:		\$1,000.00
State Rep. Todd Smith Campaign Bedford, TX 76022	CTB	Explain:		\$250.00
Committee ID: TXSMITTHO State Rep. Mabrie Jackson Campaign Plano, TX 75023	CTB	Explain:		\$250.00
Committee ID: TXJACKSHO State Rep. Charlie Geren Campaign Fort Worth, TX 76101	CTB	Explain:		\$500.00
Committee ID: TXGERENHO State Rep Burt Solomons Campaign Carrollton, TX 75011	CTB	Explain:		\$500.00
Committee ID: TXSOLOMHO				

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

Type or print in ink.
Amounts may be rounded
to whole dollars.

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through 03/17/2010		Page 178 of 182
NAME OF FILER HDR, Inc. PAC		I.D. NUMBER 860346

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CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Senator Florence Shapiro Campaign Plano, TX 75026	CTB		Explain:	\$500.00
Committee ID: TXSHAPISE				
Texans for Joe Straus San Antonio, TX 78209	CTB		Explain:	\$1,000.00
Committee ID: TXSTRAUHO				
Senator Tommy Williams Campaign Spring, TX 77387	CTB		Explain:	\$500.00
Committee ID: TXWILLISE				
Bruce Starr for State Senate OR-Cmte Hillsboro, OR 97124	CTB		Explain:	(\$100.00)
Committee ID: ORSTARRSE				
Bruce Starr for State Senate OR-Cmte Hillsboro, OR 97124	CTB		Explain:	(\$500.00)
Committee ID: ORSTARRSE				

* Payments that are contributions or independent expenditures must also be summarized on Schedule D. **SUBTOTAL** \$69,771.00

Schedule F Accrued Expenses (Unpaid Bills)

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE F

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CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTALS

Schedule F Summary

- Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of \$100 or more, plus total unitemized accrued expenses under \$100.)..... **INCURRED TOTALS** _____
- Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.)..... **PAID TOTALS** _____
- Net change this period. (**Subtract** Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.)..... **NET** _____
May be a negative number.

Schedule G
Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.
Amounts may be rounded to whole dollars.

SCHEDULE G

Statement covers period
from 01/01/2010
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NAME OF AGENT OR INDEPENDENT CONTRACTOR

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

- CMP campaign paraphernalia/misc.
CNS campaign consultants
CTB contribution (explain nonmonetary)*
CVC civic donations
FIL candidate filing/ballot fees
FND fundraising events
IND independent expenditure supporting/opposing others (explain)*
LEG legal defense
LIT campaign literature and mailings
MBR member communications
MTG meetings and appearances
OFC office expenses
PET petition circulating
PHO phone banks
POL polling and survey research
POS postage, delivery and messenger services
PRO professional services (legal, accounting)
PRT print ads
RAD radio airtime and production costs
RFD returned contributions
SAL campaign workers' salaries
TEL t.v. or cable airtime and production costs
TRC candidate travel, lodging, and meals
TRS staff/spouse travel, lodging, and meals
TSF transfer between committees of the same candidate/sponsor
VOT voter registration
WEB information technology costs (internet, email)

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

Table with 4 columns: NAME AND ADDRESS OF PAYEE OR CREDITOR, CODE, OR, DESCRIPTION OF PAYMENT, AMOUNT PAID. The table contains 5 empty rows for data entry.

Attach additional information on appropriately labeled continuation sheets.

TOTAL*

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

Schedule H – Loans Made to Others*

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE H

Statement covers period from 01/01/2010 through 03/17/2010	CALIFORNIA FORM 460
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FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT LOANED THIS PERIOD	(c) REPAYMENT OR FORGIVENESS THIS PERIOD*	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST RECEIVED	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE LOANS TO DATE
				<input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN		_____ % RATE		CALENDAR YEAR PER ELECTION**
					DATE DUE		DATE INCURRED	
				<input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN		_____ % RATE		CALENDAR YEAR PER ELECTION**
					DATE DUE		DATE INCURRED	
*Loans that are contributions to another candidate or committee must also be summarized on Schedule D. Loans forgiven must also be reported on Schedule E.			SUBTOTALS					

(Enter (e) on
Schedule I, Line 3)

Schedule H Summary

1. Loans made this period
(Total Column (b) plus unitemized loans less than \$100.)

2. Payments received on loans
(Total Column (c) plus unitemized payments less than \$100.)

3. Net change this period. (Subtract Line 2 from Line 1.) **NET**
(Enter the net here and on the Summary Page, Column A, Line 7.)

** If Required

Schedule I

Miscellaneous Increases to Cash

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE I

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DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH
3/1/2010	Comerica Bank Detroit, MI 48275	February interest	\$105.87
1/12/2010	Committee to Elect Fred Jarrett Mercer Island, WA 98040 Filer ID: WAJARRESE	candidate resigned	\$200.00
1/2/2010	Comerica Bank Detroit, MI 48275	December interest	\$108.59
2/1/2010	Comerica Bank Detroit, MI 48275	January interest	\$117.98

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL \$532.44

Schedule I Summary

1. Increases to cash of \$100 or more this period..... \$532.44

2. Unitemized increases to cash under \$100 this period..... \$0.00

3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).)..... \$0.00

4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.)..... **TOTAL** \$532.44

FPPC Form 460 (June/01)
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